

APPENDIX A

LECTURER ANNUAL SELF -ASSESSMENT

This form may be used by full-time and part-time lecturers with one-year or three-year appointments. Note: Lecturer self-assessments are voluntary on the part of the lecturer.

Due to Department Chair: Monday, February 1, 202

Name _____ Department _____

Date submitted to Department Chair: _____ Dept. Chair initials _____

Evaluation Periods: Spring Semester 202, 6 H D 7 H D Fall Semester 202

1. Describe your work requirements as stipulated in your appointment letter. (Attach