

**SCHEDULE F-5A - EVALUATION CONFERENCE REPORT: PROBATIONARY**  
**TENURE-TRACK FACULTY**

*To be completed by the Probationary Faculty Evaluation Committee (PFEC).*

Evaluatee: \_\_\_\_\_ Conference Date: \_\_\_\_\_

Tenured faculty (selected by evaluatee): \_\_\_\_\_

Tenured faculty (appointed by Academic Senate): \_\_\_\_\_

Tenured faculty (appointed by Academic Senate): \_\_\_\_\_

CIO or designated administrator: \_\_\_\_\_

**Attach the following documents to this form:**

- F-1: Confidentiality Agreement(s)
- F-2: Faculty Evaluation form(s)
- F-4A: Self Evaluation
- Student Evaluation Summary Report(s)

**CONFERENCE SUMMARY**

1. Does evaluatee use assessment results to inform teaching and improve student learning?  
 Yes       No
2. Limitations/weaknesses and/or concerns noted at last evaluation:
  - a. Progress on plan to address recommendations noted at last evaluation:
3. Significant accomplishments since last evaluation:
4. Strengths noted during this evaluation:

5. Limitations/weaknesses noted during this evaluation:

6. Current areas of concern:

7. Specific plan to address limitations/weaknesses and/or concerns

**EVALUATION TEAM RECOMMENDATION**

<b>YEAR 1</b>	<b>YEAR 2</b>	<b>YEAR 3</b>	<b>YEAR 4</b>
<input type="checkbox"/> Evaluate during the next regular interval	<input type="checkbox"/> Evaluate during the next regular interval	<input type="checkbox"/> Evaluate during the next regular interval	<input type="checkbox"/> Grant tenure
<input type="checkbox"/> Evaluate during the next regular semester	<input type="checkbox"/> Evaluate during the next regular semester	<input type="checkbox"/> Evaluate during the next regular semester	<input type="checkbox"/> Contract nonrenewal
<input type="checkbox"/> Contract nonrenewal	<input type="checkbox"/> Contract nonrenewal		

## SIGNATURES

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**Tenured faculty** (selected by evaluatee): Date

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**Tenured faculty** (appointed by Academic Senate): Date

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**Tenured faculty** (appointed by Academic Senate): Date

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**CIO or designated administrator** Date

*The signature below indicates this evaluation has been discussed with me, but does not necessarily constitute agreement with the content of the evaluation. I understand that if I choose, I have 10 business days to prepare a narrative statement to be attached to this document.*

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Evaluatee  Response attached Date

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Vice President, Instruction and Student Services or designee Date