**College of Health Professions**

**Mid-Tenure Review**

**Faculty Member's Name**

**Department**

**Present Rank**

This evaluation is made by: \_\_\_\_ Mid-Tenure Review Committee

 \_\_\_\_ Department Chairperson/Program Lead

 \_\_\_\_ Associate Dean/Vice Dean

Satisfactory progress is being made toward tenure and/or promotion: \_\_\_ yes \_\_\_ no

Title:

Date:

**TEACHING:**

Peer evaluation of individual's teaching effectiveness:

Student evaluation of individual's teaching effectiveness:

Evidence supporting marker of excellence:

**SCHOLARSHIP:**

**Note:** *Department* *Chairs must provide an assessment of the dissemination outlets in the candidate's area of scholarship work, such as the quality of journals, peer-reviewed conferences, and venues of presentations or performance, including the quality of electronic publications.* ***This assessment is required****. The quality and stature detailed in the assessment may be reflected by acceptance rates, the nature of peer review, the quality of the reviewing agency/organization, or other measures; whenever possible, these indices should be cited.*

Evaluation of individual's research and publication activity:

Published Peer Reviewed Articles:

In Press Peer Reviewed Articles:

Publications under Review:

Peer Reviewed Presentations:

Invited Presentations:

Other Scholarly Activities:

**SERVICE** (includes practice, if appropriate):

Evaluation of individual's impact - or potential for impact - in his/her profession:

Evaluation of individual's service to students, department, school, University, and (if relevant) community:

Other Remarks: