

TA packet (4 items) *9/13/19*

**AUGUST 2019**

*TCW 9/13/19*

**2019-2020 ECELS Probationary Teachers Evaluations Calendar**

*9/13/19*

*9/13/19*

SUN	MON	TUES	WED	THUR	FRI	SAT
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23 Plenary	24
<b>ECELS/Coordinator forms TECs for all 1<sup>st</sup> year</b>						
25	26	27	28	29	30	31
Probationary faculty						

**SEPTEMBER 2019**

SUN	MON	TUES	WED	THUR	FRI	SAT
1	2	3	4	5	6	7
	Holiday	<b>Challenge timeframe for 1<sup>st</sup> yr</b>				
8	9	10	11	12	13	14
Probationary faculty						
15	16	17	18	19	20	21
22	23	24	25	26	27	28
Evaluations set up in system						

Parent/staff surveys and applicable tenure review evaluations

**OCTOBER 2019**

SUN	MON	TUES	WED	THUR	FRI	SAT
Parent/staff surveys and applicable tenure review evaluations						
6						
13						
20	21	22	23	24	25	26
27	28	29	30			

**NOVEMBER 2019**

SUN	MON	TUES	WED	THUR	FRI	SAT
Parent/staff surveys and applicable tenure review evaluations						
3						
10						
17	18	19	20	21	22	23
24	25	26	27	28	29	30
HOLIDAY Week						

**August 19–August 30**

ECELS Liason or Coordinator is responsible for establishing the Chair and second faculty member of the Tenure and Evaluations Committee (TEC) for all first year probationary faculty in the department and verifying committee membership for 2<sup>nd</sup>, 3<sup>rd</sup>, and 4<sup>th</sup> year. A random (outside) committee member will be appointed to the ECELS TEC committees.

**September 3-16** 1<sup>st</sup> year probationary faculty notified of their TEC composition by August 31. September 4 is the beginning of the 10-day challenge timeframe for 1<sup>st</sup> year probationary faculty per Article 17.6.3.

**September 23-27** TERB office sets up parent/staff surveys in EvaluationKit for online deployment and sends out parent/staff survey packets for face-to-face deployment.

**September 30-December 7** Evaluations for ECE Lab School conducted in this timeframe. Please send completed parent/staff survey and, if applicable, tenure review evaluation to the TERB office as soon as they are completed.

**December 9 DUE date for parent/staff survey packets and applicable tenure review evaluation or rating scales.**

- Completed parent/staff survey packets and applicable rating scales are due in the TERB office.
- Classroom observations, parent/staff surveys, and (if applicable) other approved tenure review evaluation or rating scales are due to the TEC Chair.
- Deadline for probationary faculty to submit their (1) Self Evaluation Form with professional development, and (2) other materials related to teaching, to the TEC Chair.

**DECEMBER 2019**

SUN	MON	TUES	WED	THUR	FRI	SAT
1	2	3	4	5	6	7
Parent/staff surveys and applicable tenure review evaluations						
8	9	10	11	12	13	14
Confirm TEC meeting date						
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

**December 10-13** TEC Chair confirms the date and time that all TEC members meet to review evaluation materials and write the evaluation.

**JANUARY 2020**

SUN	MON	TUES	WED	THUR	FRI	SAT
			1	2	3	4
5						11
12						18
19						25
26	27	28	29	30	31	

**January 6-January 23 (excluding holidays):**

- TEC committee reviews evaluation results and writes evaluation reports. TEC chairs must schedule at least one meeting that includes ALL committee members present to discuss the results.
- After* the evaluation is completed and signed by TEC members, TEC chair and at least one other committee member meets with the probationary faculty to review the evaluation.

**January 24, 2020 (or sooner)** Completed probationary packets due in TERB office no later than 3pm on January 25, 2020.

**MARCH 2020**

SUN	MON	TUES	WED	THUR	FRI	SAT
1	2	3	4	5	6	7
8	9	10	11	12	13	14
Evaluation packets sent to TEC chairs						
15	16	17	18	19	20	21
Parent/staff surveys and applicable tenure review evaluations						
22	23	24	25	26	27	28
Spring break						
29	30	31				

**March 2** Final & complete Tenure Evaluation Review Report due in TERB office (including any approved Improvement Plan). Reports taken to President's Office for review and Governing Board action.

**March 9- 13** TERB office will send parent/staff survey and applicable tenure review evaluation to TEC chairs. (Classroom/workplace observations in the spring semester.)

**APRIL 2020**

SUN	MON	TUES	WED	THUR	FRI	SAT
5	6	7	8	9	10	11
Parent/staff surveys and applicable tenure review evaluations						
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30		

**March 16-May 23** Parent/staff surveys and applicable tenure review evaluation or rating scales are conducted in this timeframe. Please send completed surveys to the TERB office as soon as they are completed.

**May 2020**

SUN	MON	TUES	WED	THUR	FRI	SAT
						2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24/31	25	26	27	28	29	30

**May 25-June 11:**

- TEC committee reviews surveys and evaluations and meets with evaluatee to complete Spring Semester Review Meeting Confirmation form.

**June 2020**

SUN	MON	TUES	WED	THUR	FRI	SAT
	1	2	3	4	5	6
7	8	9	10	11	12	13

**June 12, 2020:** Spring Semester Review Meeting Confirmation Form due in TERB office.

Division Dean

**Palomar College  
Part-Time Faculty Evaluation**

**Division Deans:** In response to your request per 17.3.1.2, please complete this form as a component of the evaluation of the part-time faculty member named below.

Name of Evaluatee:

\_\_\_\_\_

1. The evaluatee adheres to contract guidelines.

Yes: \_\_\_\_\_ No: \_\_\_\_\_

**Comments** (if the response is negative, comments are required):

Signature:

Division Dean \_\_\_\_\_

Date: \_\_\_\_\_

(print name): \_\_\_\_\_

**PALOMAR COLLEGE**  
**Part-Time Counseling Faculty Review Report**

Part-Time Counseling Faculty Evaluatee: \_\_\_\_\_

Evaluator: \_\_\_\_\_

Department: \_\_\_\_\_

Semester/Year of Evaluation: \_\_\_\_\_

After reviewing student evaluations, the classroom observation form, and the Department Chair's form, the Evaluator (Department Chair/Director/Designee) will complete the following report. A copy of this signed Evaluation Report, along with the other materials noted on the Evaluations Checklist, must be given to the evaluatee, and another copy must be sent to the TERB Office. Evaluatees have 10 business days; beginning on the date the report was signed by the evaluatee, to add a response to their evaluation by sending it to the TERB Office (AA-112). After the 10-day comment period, this report and any evaluatee comments become part of the evaluatee's personnel file maintained in the Human Resources Office.

***Definitions of evaluation categories:***

*(Standards of Performance for Faculty, Faculty Manual)*

***High Professional Performance*** - Frequently exceeds accepted standards of professional performance. (Check this box when the instructor's professional performance is beyond what is reasonably expected.)

***Standard Professional Performance*** - Regularly meets accepted standards of professional performance. (This is the standard of performance that is expected of all instructors when they are hired and they are expected to maintain this level of performance throughout their tenure at Palomar College.)

***Performance Needs Improvement*** - Does not consistently meet accepted standards of professional performance.

***Unsatisfactory Performance*** - Does not meet minimal standards of professional performance.

**Comments are required for all questions.**

1. The counselor demonstrates depth of knowledge, experience, and competency in ~~academic, career and~~ personal counseling.

High Professional Performance

Standard Professional Performance

Needs Improvement

Unsatisfactory Performance

**Comments:**

2. ~~The counselor demonstrates accuracy and currency in academic and career advising and proficiency in integrating relevant material, resources, and ideas into the counseling session.~~ The counselor demonstrates proficiency in integrating relevant material, resources, and ideas into the counseling session.

High Professional Performance       Standard Professional Performance  
 Needs Improvement                       Unsatisfactory Performance

**Comments:**

3. The counselor presents and communicates information in a clear, well-organized and informative manner, using appropriate methods and materials.

High Professional Performance       Standard Professional Performance  
 Needs Improvement                       Unsatisfactory Performance

**Comments:**

4. ~~The counselor demonstrates effectiveness in advising and counseling students in the areas of career and life goals and educational objectives.~~ The counselor is effective in establishing rapport with students as demonstrated by a strong therapeutic alliance (a therapeutic alliance is evident when the client feels comfortable with the counselor, has a sense of common goals or purpose with the counselor, and feels a sense of safety and trust in the counseling process).

High Professional Performance       Standard Professional Performance  
 Needs Improvement                       Unsatisfactory Performance

**Comments:**

5. The counselor establishes rapport with the student by demonstrating interest, enthusiasm and patience, showing respect for the student, and engaging the student in the counseling session.

High Professional Performance       Standard Professional Performance  
 Needs Improvement                       Unsatisfactory Performance

**Comments:**

**Summary Comments: (Required)**

**Overall Recommendation: (Required)**

High Professional Performance

Standard Professional Performance

Performance Needs Improvement

Unsatisfactory Performance

**Signatures:**

Department: \_\_\_\_\_

Evaluator : \_\_\_\_\_ Date: \_\_\_\_\_  
(print name): \_\_\_\_\_

Department Chair (see form attached: \_\_\_\_\_ Date: \_\_\_\_\_  
(print name): \_\_\_\_\_

My signature acknowledges that I have met with my evaluator and reviewed my evaluation. It does not mean that I agree or disagree with the review report. I am aware that within ten business days after signing this report, I have the right to submit a response to this evaluation to the TERB Office (AA-112). I am also aware that this evaluation and my response, if any, will become part of my personnel file maintained in the Human Resources Office.

Part-Time Faculty Evaluatee: \_\_\_\_\_ Date: \_\_\_\_\_  
(print name): \_\_\_\_\_

**Administrative Signature**

My signature acknowledges that I have read the Part-time Counselor Review Report.

Division Dean: \_\_\_\_\_ Date: \_\_\_\_\_  
(print name): \_\_\_\_\_



Department Chair

**Palomar College  
Part-Time Counseling Faculty Evaluation**

**Department Chairs:** Please complete this form as a component of the evaluation of the part-time faculty member named below. If you have designated another full-time faculty member as the Evaluator, please give the completed form to your designee for inclusion in the evaluative materials.

Name of Evaluee: \_\_\_\_\_

1. The counselor adheres to the weekly schedule of appointments submitted to the department chair or director. For example, counselor is on time and notifies appointment desk in a timely manner when unable to meet his/her scheduled shift.

High Professional Performance                       Standard Professional Performance  
 Needs Improvement                                       Unsatisfactory Performance

**Comments** (if performance is Needs Improvement or Unsatisfactory, comments are required):

2. The counselor adheres to department procedures and is responsive to communications from the department.

High Professional Performance                       Standard Professional Performance  
 Needs Improvement                                       Unsatisfactory Performance

**Comments** (if performance is Needs Improvement or Unsatisfactory, comments are required):

3. The counselor participates appropriately in the Service Area Outcomes Assessment Cycle.

Yes: \_\_\_\_\_ No: \_\_\_\_\_

**Comments** (if the response is negative, comments are required):

Signature:

Department Chair \_\_\_\_\_ Date: \_\_\_\_\_  
(print name): \_\_\_\_\_

Approved TERB 26 Aug 2019 | Approved PFF 12 Sept 2019

Recommended by the Tenure and Evaluations Review Board, Spring 2013  
for use beginning Fall 2013.

## Student Ratings of Counselor [Behavioral Health Services]

1. **I felt that my counselor conveyed interest and enthusiasm.**
2. **I felt respected by my counselor.**
3. ~~Presents information in a clear and well-organized manner.~~ I felt my counselor heard and understood me.
4. ~~Encourages involvement, discussion, and questions.~~ I felt a sense of trust and safety in the therapeutic relationship with my counselor.
5. ~~Goes beyond the expected to help plan my academic program.~~ I felt my counselor was listening to me and that we shared common goals/purpose in my counseling experience.
6. ~~Challenges and encourages me to think independently.~~ My counselor helped me feel a sense of hopefulness.
7. **I felt that my counselor adhered to the schedule for my appointment.**
8. ~~Evaluated my situation in a timely manner.~~ My counselor's techniques and approaches were effective for our work together.
9. ~~Displays effective communication skills.~~ My counselor was culturally sensitive and informed.
10. ~~Clearly explains educational questions (i.e., AA degree, credential transfer).~~ My counselor suggested strategies that could help me improve my well-being.
11. **I felt that my counselor encourages students to utilize additional resources (i.e., career center, library).**
12. **I felt that my counselor provides a non-biased environment for students from diverse backgrounds.**
13. **I felt that my counselor is easy to approach, patient, and willing to help.**
14. ~~This counseling session has encouraged me to strive to meet my goals.~~ I would recommend my counselor to a friend.
15. ~~Overall, the counselor is doing an excellent job.~~ Would you ever use Behavioral Health Counseling Services in the future? (Yes or No)

YOUR COMMENTS WILL BE TYPED BEFORE THEY ARE GIVEN TO THE COUNSELOR.

What are ~~this counselor's professional strengths~~ was most helpful about your counselor?

What do you believe might have been done to improve your counseling session?

Do you have any additional comments?