Department Head
EDO Performance Objectives
College of Arts and Sciences

Name: Click here to enter text.   UTC ID: Click here to enter text.

Year Being Evaluated   Click here to enter text.   Employee #: Click here to enter text.

Department: Click here to enter text.

Academic Rank and Title of Position: Click here to enter text.

Date of Appointment to Present Rank: Click here to enter text.

Years of Service in Administrative Position: Click here to enter text.

Release Time for Administrative Position: Click here to enter text.

Fill in the sections of this form identifying all activities to be undertaken during the year being evaluated to accomplish your individual objectives in the four performance areas. Enter the percent of effort for each area in the parenthesis.

1.   Departmental Administration (Click here to enter text.**%)**

1.1

2. Teaching and Advisement (Click here to enter text.**%)**

2.1

3. Research, Scholarship, and Creative Activities (Click here to enter text.**%)**

3.1

4. Professional Service (Click here to enter text.**%)**

4.1

Overall Dean Comments _____

_____

_____

Overall EDO rating range should routine responsibilities and objectives be met:

       __   Meets Expectations for Rank and Position

       __   Needs Improvement for Rank and Position

       __   Unsatisfactory for Rank and Position

_____   _____

 Signature of Department Head   Date   Signature of Dean   Date