|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 346B2 0 1 9 - 2 0 2 2 F A C U L T Y C O N T R A C T | | | | | |
| 347BH.6.b.: SELF EVALUATION - CHAIR | | | |  |
| 348BAdjunct | 349BProb. | 350BRegular | 351BDept. Chair | 352B◼ Self Evaluation – Chair ◼ |
| 353Bx | 354Bx | 355Bx |  | 356B◼ Mt. San Antonio College ◼ |

Department Chair:       Date:

Department:       Division:

**The self-evaluation report must be submitted by the end of the week eight (8) of the spring semester.**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **A.** | **Summary of accomplishments and performance based on Department Chair Performance Expectancies (Article 18.F.):** | | | | | |
|  | Areas of Excellence: | |  | Areas for improvement: | | |
| **B.** | **I will be working on the following self and professional improvement items in the** **-****academic year.** List your top goals | | | | | |
|  | Goals & Objectives: | |  | Action Plan: | | |
| **C.** | **I need the following assistance:** | | | | | |
|  | Support, conferences, training, etc. | | | | | |
|  | The Dean or Associate Dean can give me assistance by: | | | | | |
| **D.** | **I have met, or will meet, my four (4) hours of mandatory department chair training this year by participating in the following:** | | | | | |
| **E.** | **Signatures:** | | | | | |
|  | Department Chair: |  | | | Date: |  |
|  | Dean or Designee: |  | | | Date: |  |
|  |  | | | | | |
| **F.** | **Dean or Associate Dean Comments (optional):** | | | | | |
|  | **Distribution:**  Faculty Member  Division Office  Human Resources | | | | | |
|  | 7/14 | | | | | |