## SANTA BARBARA CITY COLLEGE FACULTY EVALUATION SUMMARY\*

Evaluatee:					
Overall Ev	<i>r</i> aluation:				
s	atisfactory with regard to each	of the applicable District	Performance Crite	ria	
	eeds Improvement with regard nclude Plan for Improvement as				
	ubstandard with regard to each Include Plan for Improvement, w				
Acknowle	dgment of Receipt:				
Evaluatee:				Date:	
date to sub with the co	omit to my area dean an optiona ontent.	I addendum to the evalu	ation packet. My si	gnature does not necessar	ily indicate agreement
	Obs.:	Till Developed		Date:	
(Committee	e Chair) Name	, Title, Department			
Evaluator:				Date:	
		, Title, Department			
Evaluator:				Date:	
	Name	, Title, Department			
Received 8	& Forwarded:	tment Chair		Date:	
	2004.	anoni onan			
Received:				Date:	
	Dean				
Received:	Executive Vice President, E	ducational Programs		Date:	
	- 7	Ç ·			
Received:	Lluma	n Resources		Date:	
	Huma	n Kesources			
Next Evalu	ation Due:				

\*Except for an optional addendum from the evaluatee, no additional information or documents shall be included in the evaluation after the summary form is signed.

Evaluation Summary for Regular (Tenured), Contract (Probationary) and Temporary Faculty (Academic Policies Committee 2-26-16; Academic Senate 9-14-2016)