Faculty Name and Email

Evaluation Ratings

LSU Health Sciences Center – New Orleans

Faculty Evaluation Form

SOM LEADERSHIP EVALUATION SUPPLEMENTAL RATING FORM

Evaluation Period: 1/1/2024 TO 12/31/2024

Form Note: Adobe Acrobat is required to complete this form. <u>Do Not</u> use an Internet browser to complete as this may impact form calculations. Calculations for Sections A-E will generate automatically. The calculate button must be selected for the Overall Evaluation Rating to generate.

	1 = Unsatisfactory (Does not meet expectations) 2 = Needs Improvement (Meets some but not all expectations) 3 = Successful / Meets Expectations 4 = Exceeds Expectations (Meets all and exceeded some expectations)						
Reviewer/Evaluator Name	•	g (Consistently exceeds <u>all</u> expectations)					
	Self-Evaluation	n?					
	Click here if you are comp	e if you are completing a self-evaluation. 🗕					
Instructions: Assign weights to each section and rate pe	rformance for eac	ch crit	eria.				
Research and Scholarship:% of overall jo	nh denartment	/offi	-	necta [.]	tions		
Research and Scholarship	_	N/A	1	2	3	4	5
Quality and quantity of departmental scholarly active		,					
Quality of departmental research and inquiry							
Departmental productivity in grants and contracts for ex	ternal funding						
Summary Rating: Calculated as the average of all rated applications	able section criteria						
Comments:							
Teaching and Mentorship:% of overall de		n/a	epect 1	ations 2	3	4	5
Quantity of departmental teaching and/or mentors		IV/A					
Quality of departmental teaching and/or mentorship							
3. Development and implementation of innovations in	education						
Summary Rating: Calculated as the average of all rated applic	able section criteria.						
Comments:							

Service and Administration:	% of overall department/o	ffice e	expec	tatio	ns		
		N/A	1	2	3	4	5
1. Quantity and quality of department	ental clinical service						
2. Impact of departmental administ	trative service for the school or HSC						
3. Departmental compliance with University procedures	ty (and Hospital) processes and						
Summary Rating: Calculated as the ave	rage of all rated applicable section criteria.						
Comments:							
Leadership and Development: 1	10% of overall job duties						1
		N/A	1	2	3	4	5
1. Mentors junior faculty for advan	cement						
2. Develops mid-career/senior facu	lty for leadership						
3. Demonstrates effective problem	solving						
Summary Rating: Calculated as the aver	rage of all rated applicable section criteria						
	age of all rated applicable section criteria.						
Comments:							
Collaboration and Communicat	ion: 10% of overall job duties						
		N/A	1	2	3	4	5
1. Clear, tactful, and efficient comn	nunication						
2. Fosters collaboration within dep	artment and with external						
departments/entities							
3. Respectful and courteous to colle	eagues, staff, and learners						
Summary Rating: Calculated as the aver	rage of all rated applicable section criteria.			•			
Comments:					1		

Integrity: 10% of overall job duties

	N/A	1	2	3	4	5
Accepts responsibility for departmental faculty and overall performance						
2. Dependable						
3. Fosters a culture of trust, fairness, and respect						
Summary Rating: Calculated as the average of all rated applicable section criteria).					
Comments:						

OVERALL EVALUATION RATING

Overall Evaluation Rating Calculator: Corresponding Section Summary Ratings are transferred to the Overall Evaluation Rating Calculator, then multiplied by the % weight assigned to the section. The total Weighted Score Rating for all sections determines the Overall Evaluation Rating.

Section	% Weight Assigned to Section		Section Summary Rating		Weighted Rating
Research & Scholarship		X		=	
Teaching & Mentorship		Х			
Service & Administration		Х		=	
Leadership & Development	0.10	Х		=	
Collaboration & Communication	0.10	Х		=	
Integrity	0.10	х		=	
Overall Evaluation Rating	Total weight must be 100%				

Overall Rating Scale & Overall Rating Category

4.50 – 5.00	Outstanding
3.50 – 4.49	Exceeds Expectations
2.50 - 3.49	Successful
1.50 – 2.49	Needs Improvement
1 00 - 1 49	Unsatisfactory

SIGNATURES – This appraisal has been discussed by the undersigned and a copy given to the employee.

**Signature does not indicate agreement or disagreement but simply that the evaluation has been discussed.

REVIEWER SIGNATURE	I have discussed with my employee the performance evaluation ratings enclosed and the performance expectations for them during the upcoming rating period. DATE:
EMPLOYEE SIGNATURE	My manager has discussed with me the performance evaluation ratings enclosed on which I have been rated and the desired performance expectations for the upcoming rating period. DATE:
2 ND LEVEL REVIEWER SIGNATURE	In support of fair and equitable evaluations, a 2 nd Level Reviewer will be required for any OVERALL CATEGORY RATING of (4.5-5.0) Outstanding, or (1.0-1.49) Unsatisfactory. 2 nd Level Reviewers should evaluate ratings to ensure sufficient documentation/comments have been included to warrant the overall rating. Contact your Business Manager or HRM Talent Development to identify this person if needed.
	DATE: