

**Department of Languages, Literatures, and Cultures
Peer Evaluation Form**

Evaluation for: _____
(Name and Rank)

Evaluated by: _____
(Name and Rank)

Date of Evaluation: _____ **Course:** _____

Evaluation: Please write or type your evaluation on this form or complete this form and attach your remarks. Each peer evaluation should be done by a different faculty member at a higher rank, but there are no restrictions as to rank or language program. Supplementary documents may also be submitted but are not required. If you prefer to use a separate sheet of paper, please sign and date the evaluation, complete the required information above, staple together and give to the person evaluated for their signature and submission to the Chair's office.

Evaluator's Signature

Date

Evaluee's Comments (optional):

*** Signature of Faculty Person Evaluated**

Date

** Please retain copy and return signed original to the Chair's office.*

5/30/2016