*Faculty Member’s Name*

*Academic Unit*

*Highest Degree and Date*

*Date of First Appointment to RIT*

*Current Rank and Date Achieved*

*Faculty Member’s Name*

1. **Teaching**

**For each class:** Provide a brief and thoughtful review (200 – 300 words) of what you have achieved relative to the area of teaching/advising. Be sure to include an analysis of student evaluations indicating areas of strengths and weaknesses as well as actions taken to address concerns.
Reflect on relevant diversity, equity, inclusivity, and accessibility (DEIA) teaching activities. Original documentation should not be submitted, but it should be available upon request. (Examples of such documentation could include one or more of the following: student performance data, student evaluations, curricula/syllabi for new or revised courses, advising logs/evaluation.)

*The following information is required:*

1. Course names, credit hours/contact hours, number of students, format (lecture/lab/studio),
presence of an NTID section, and GA/TA support

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| **Course Name** | **Credit Hours** | **Number of Students** | **Format** (Lecture/Lab/Studio) | **NTID**  | **GA****TA**  |
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1. A summary of your evaluation ratings and reflections on students’ constructive feedback.
2. Names of students with whom you worked this academic year with specific projects
(name of research program, independent study, capstone, thesis, etc.)
3. Other

*Faculty Member’s Name*

1. **Service**

Provide a brief and thoughtful review (up to 250 – 500 words) of what you have achieved relative to the area of service. Service activities are those taken on to benefit one’s community at any level within or external to the institute. Examples include participation on or leadership of a school, college, or institute committee, recruitment efforts, development efforts, or participation or leadership role in a professional organization, etc. Reflect on relevant diversity, equity, inclusivity, and accessibility (DEIA) service activities.

*Original documentation should not be submitted, but it should be available upon request.*

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| **Service Activity**(Indicate if service was for Program, School, College, University, External) | **Your Role** | **Dates Served**  | **Average Time Commitment Per Semester** |
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*Faculty Member’s Name*

1. **Other**

If your most recent Plan of Work called for any special activity outside of the above categories,
please provide an appropriate review of the evidence that such plans have been achieved.

*Faculty Member’s Name*

**NOTE: This section is optional and not required.**

1. **“Life Circumstances” Impact Statement**

An optional Life Circumstances Impact Statement allows you to document the impact of significant
life events during your annual faculty review which affected your productivity or balance of work responsibilities during the evaluation period. These significant events could include life-changing responsibilities such as providing elder care, caregiver responsibilities for an ill or injured member
of their immediate family or a family disaster. Childbirth or adoption are excluded, as they are
defined in E33.0 – Family Leave Policy. (<https://www.rit.edu/policies/e070>)