

ANNUAL REVIEW

This form shall be used by the faculty mentor to conduct the required annual review of the postdoctoral scholar. The annual review must be completed in accordance with divisional deadlines.

Name	
Department	
Faculty Mentor	
Date	
Review Period	

If Reappointment is being proposed:

Effective Dates of Reappointment	
Proposed Annual Salary upon Reappointment	

ASSESSMENT OF PERFORMANCE (To be completed by the faculty mentor):

1. Progress to date. Were expectations met? (max 500 characters)

2. What are the postdoctoral scholar's strengths? (max 500 characters)

3. In what areas does the postdoctoral scholar need to improve? (max 500 characters)

4. What is the postdoctoral scholar's potential for a research career in the discipline? (max 500 characters)

IF REAPPOINTMENT IS PROPOSED, WHAT ARE THE GOALS, OBJECTIVES AND EXPECTATIONS OF THE NEXT APPOINTMENT? (To be completed by the faculty mentor): (max 800 characters)

OVERALL RATING (To be completed by faculty mentor. Check one):

Unsatisfactory __ Improvement Needed __ Satisfactory __ More than Satisfactory __ Excellent ____

POSTDOCTORAL SCHOLAR'S RESPONSE, COMMENTS, CONCURRENCE (or add separate sheet): (max 500 chars)

Postdoctoral Scholar Signature

Date

Signature of Faculty Mentor

Date

CONCURRENCE OF DEPARTMENT CHAIR/UNIT HEAD (where relevant):

Chair/Unit Head

Date