IMPERIAL VALLEY COLLEGE
EVALUATION OF DUTIES AND RESPONSIBILITIES
COUNSELORS

Faculty Member: ___________________________ Semester: _______________________

Faculty Member’s Status (circle): Tenure Review  Full-Time Permanent  Full-Time Temporary  Part-time

Date of Evaluation: _________________ Evaluator: ___________________________

Scoring: NA = Not Applicable  2 = Competent  4 = Very Good
1 = Marginal or Unsatisfactory  3 = Above Average  5 = Exceptional

I. Performance of professional responsibilities:

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A. Maintains appropriate records and documentation
B. Maintains accurate and appropriate data entry
C. Posts and maintains appointment schedule
D. Participates in the development, assessment, and evaluation of student learning outcomes/service area outcomes as appropriate
E. Other professional responsibilities

Comments:

II. Performance of departmental and campus duties:

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A. Attends appropriate division, department, or office meetings
B. Serves on campus committee(s)
C. Other departmental or campus duties

Comments:

Faculty Member Name ___________________________ Signature ___________________________
Evaluator Name ___________________________ Signature ___________________________