

**PART-TIME LECTURER
APPLICATION FOR INITIAL OR PERIODIC EVALUATION**

**This cover page must be submitted with the narrative and supporting materials for evaluation.
Please fill in all the information requested.**

Lecturer's Name: _____ EID: _____
 First Name Last Name

DEPARTMENT: _____ Date: _____

Please check one:

Initial Evaluation (by the end of the employee's 2nd appointment)

Periodic Evaluation (by the end of the employee's 4th appointment)

Periodic Evaluation (every 6th semester thereafter)

Education (list all degrees with institutions: start with the most recent):

- 1.
- 2.
- 3.

Please verify that the following required materials are included by indicating with a check mark.

1. Curriculum Vita
2. Course Materials
 - a. The syllabus for each unique course taught
 - b. A representative sample of assignments, exams, PowerPoints, handouts, etc. . . .
3. Student Evaluations
4. Other work assigned (if applicable)