COLLEGE OF THE CANYONS REPORT OF TENURE REVIEW COMMITTEE

Name of Evaluatee:				
Semester # in Tenure Process:	(Complete corresponding section below)			
Date of Semester Review Conference:				
Bute of Belliester Review Conf.				
Names of Committee Members	s:			
Chair:				
Peer Evaluator:				
Administration Evaluator:				
The following have been attach			Description	
	Committee Summary Self Evaluation		Peer Evaluation Administrator Evaluation	
	Chair Evaluation		Remediation Plan (if applicable)	
Zero Semester (Spring Hire Only)	Full Evaluation Recommendation:			
(Spring Time Omy)	☐ Continue			
	 □ Continue with reservations (Remediation Plan required) □ Terminate employment 			
1 st Semester (Fall)	Full Evaluation Recommendation:			
	☐ Continue			
	 □ Continue with reservations (Remediation Plan required) □ Terminate employment 			
and a				
2 nd Semester (Spring)	Full Evaluation Recommendation:			
(1 0)	☐ Continue			
	 □ Continue with reservations (Remediation Plan required) □ Terminate employment 			
ard o	D. H.D. L. et			
3 rd Semester (Fall)	Full Evaluation Recommendation:			
, ,	☐ Hire for 2 years Optional evaluation in the fourth semester by d	lagicic	on of the evaluation committee	
	□ Not to rehire			
	 Mandatory evaluation required in the fourth ser evaluation in writing. 	meste	r unless the evaluatee waives the	
	evaluation in writing.			
4 th Semester	Evaluation			
(Spring)	Recommendation:			
	☐ Continue with reservations (Remediation Plan required)			
5 th Semester	Full Evaluation			
(Fall)	Recommendation: Continue			
	 Optional evaluation in the sixth semester by de 	ecision	n of the evaluation committee.	
	☐ Continue with reservations (Remediation Plan required) ○ Mandatory evaluation required in the sixth sem	nester		
	,			

6 th Semester	<u>Evaluation</u>	
(Spring)	Recommendation:	
	☐ Continue	
	☐ Continue with reservations (Remediation Plan required)	
7 th Semester	Full Evaluation	
(Fall)	Recommendation:	
	☐ Grant tenure	
	Optional evaluation in the eighth semester by decision of the evaluation	
	committee.	
	☐ Terminate employment	
	o Mandatory evaluation required in the eighth semester unless the evaluatee	
	waives the evaluation in writing.	
	5	
8 th Semester	Evaluation	
(Spring)	Recommendation:	
(Spring)	☐ Confirm granting of tenure	
	☐ Confirm termination of employment	
	2 Committee of Comprosition	
Signature of Committee Chair	Date	
Signature of Committee Chair	Date	
Signature of CIO/CSSO	Date	
Signature of electores	2	
Recommendation sent to Chancellor	Date	
Received by Human Resources Departn	nent Date	