CLAS SUMMARY ASSESSMENT  
FOR FIVE-YEAR PEER REVIEW OF TENURED FACULTY

The peer review is performed by a faculty committee and submitted by the DEO in every fifth year of the reviewee’s service as a tenured faculty member. See “CLAS Procedures for Five-year Review of Tenured Faculty,” at http://clas.uiowa.edu/faculty/faculty-appointments-review-tenured-faculty-review, for the standard five-year review and the extended five-year review processes.

__________________________________________________________________________________________________________________  
Name of Faculty Member Reviewed  Department

The following materials are REQUIRED for the evaluation of TEACHING EFFECTIVENESS:
- Student evaluations (all courses since last review)
- Review of syllabi/course materials
- Class or Video Observation (date ______)
- Other (optional) ______________________________

Summary assessment of the effectiveness and significance to the Department of the reviewee’s teaching, with reference to CLAS and departmental Standards for Tenured Faculty Review:

Check evidence by which SCHOLARLY/CREATIVE PRODUCTIVITY was evaluated:
- Books published/in press
- Refereed papers/articles
- Invited papers/chapters
- Performances/juried exhibitions
- Published reviews/citations of reviewee’s work
- Electronic publications
- Other ______________________________________________________________________

Summary assessment of productivity and of the significance of the reviewee’s scholarly/creative work, with reference to CLAS and departmental Standards for Tenured Faculty Review:

Check areas in which there were SERVICE CONTRIBUTIONS to be evaluated:
- Department
- College
- University
- Profession
- Public Engagement

Summary of the extent, quality, and significance of the reviewee’s service contributions, with reference to departmental Standards for Tenured Faculty Review:

Names of Review Committee members and Signature of Committee Chair:

__________________________________________________________________________________________________________________  
Reviewee’s Signature _______________________________  Date ______________________

Dean’s Signature _______________________________  Date ______________________