

# POSTDOCTORAL SCHOLAR EVALUATION

OPS Eval Form -002

|                        |                                 |
|------------------------|---------------------------------|
| <b>Scholar's Name:</b> | <b>College/School/Division:</b> |
| <b>Department:</b>     | <b>Period of Evaluation:</b>    |

## A. Evaluation Summary

|  | Percent Time | Qualitative Evaluation | Numerical Equivalent | Relative Weights<br>(enter as a decimal) | = Totals  |
|--|--------------|------------------------|----------------------|--|-----------|
| Technical Skills   |              |                        |                      | X  | = 0.00    |
| Research/ Creative Activity                                |              |                        |                      | X  | = 0.00    |
| Service  |              |                        |                      | X  | = 0.00    |
| Mentoring, training, collaborating with students and peers |              |                        |                      | X  | = 0.00    |
| Other – Describe   |              |                        |                      | X  | = 0.00    |
|  |              |                        | Cumulative Totals    | = 0.00 *                                 | = 0.00 ** |

\*Must total 1.0

\*\*Must not exceed 5.0

Overall: \_\_\_\_\_

## B. Justification – Please include advisory comments

Technical Skills:

Research/Creative Activity:

Service:

Mentoring/collaboration:

Other Duties (list):

**Overall – Please include suggestions/goals for future activities and career progression.**

Evaluator's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Scholar's Signature: \_\_\_\_\_  
(Acknowledges receipt and does not necessarily imply concurrence.)

Date: \_\_\_\_\_