

Supervisor Evaluation Form

Supervisor's Name: _____

College: TSJC

Circle the Group You Represent: Faculty Exempt Staff Classified Staff

Please check the appropriate number with 5 being the highest/strongest and 1 being the lowest/weakest for each of the following questions. Check n/a if you do not have sufficient knowledge to rate the question. Feel free to briefly comment in the space provided.	5	4	3	2	1	n/a
1. Is he/she effective in communicating his/her expectations to staff and/or faculty members?						
2. How effective is he/she in providing meaningful performance feedback.						
3. How responsive is he/she to suggestions and input from faculty and staff? Does he/she solicit input from the faculty/staff?						
4. Does he/she respond to faculty and staff inquiries (either via email, in person, or by phone) in a timely manner?						
5. How effective is he/she in initiating and supporting strategies for recruitment, retention and success of students?						

Please check the appropriate number with 5 being the highest/strongest and 1 being the lowest/weakest for each of the following questions. Check n/a if you do not have sufficient knowledge to rate the question. Feel free to briefly comment in the space provided.	5	4	3	2	1	n/a
6. Please make any comments you wish to that the questions did not elicit. Your comments will be typed and given to the supervisor. Thank you!						