

L&C TA or Instructor Checklist

Submit to Jackie by 2/23

First Year

Fall Obs 1

Fall Obs 2

Spring Obs 1

Fall Student Evaluations

Updated CV

Mentee Name: _____

Syllab(us/i)

Date: ____/____/____

Optional
Narrative self-evaluation (1 pg)

Mentor Name (Spring): _____

Due by 3/1

Signed Departmental Evaluation
(this is drafted by the mentor, and reviewed by the mentoring director, and signed by the DEC co-chair)

Date: ____/____/____

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Second or Third Year

- Spring Obs 2 (last year)
- Spring Student Evaluations (last year)
- Fall Obs 1
- Fall Obs 2
- Spring Obs 1
- Fall Student Evaluations
- Updated CV Mentee Name: _____
- Syllab(us/i) Date: ____/____/____
- Optional* Narrative self-evaluation (1 pg) Mentor Name (Spring): _____

Due by 3/1

- Signed Departmental Evaluation Date: ____/____/____
(this is drafted by the mentor, and reviewed by the mentoring director, and signed by the DEC co-chair)