

CHECKLIST TO ASSURE FAIRNESS (UNIT 18 TITLES)

Use for all reviews except those with confidential material in the review file (e.g., Excellence Review)

Name of Candidate _____ Division _____ Dept/Unit _____

Type of Action _____ Review Period _____ Effective Date _____

Candidate's initials indicate that these obligations have been fulfilled in her/his current academic personnel review. Make annotations as necessary. *Signatures of both Candidate and Unit Head are required.*

BEFORE THE PERSONNEL REVIEW FILE IS ASSEMBLED:
Candidate's initials and date requirement met

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|----------|----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. _____ | _____ | Candidate was notified by the Department Chair/Unit Head or designee of the purpose, timing, criteria and procedures for evaluation. |
| 2. _____ | _____ | Candidate was made aware that timeliness in submitting narrative evaluations will be considered by all review agencies. |
| 3. _____ | _____ | Candidate was made aware that past personnel actions may be viewed during the current review process. |
| 4. _____ | _____ | Candidate was asked to provide the following information as appropriate. Submit to department according to department's deadline. Check those items Candidate actually provided. |
| | a. _____ | Updated Curriculum Vitae or Cumulative Bio-bibliography with current home address. |
| | b. _____ | Statement of pedagogical philosophy and goals (optional) |
| | c. _____ | Syllabi, reading lists, tests, instructional handouts |
| | d. _____ | Other information which the Candidate wishes to have included in the review file (optional) |
| | e. _____ | Names of persons who, for reasons set forth in writing by the Candidate, might not objectively evaluate the Candidate's qualifications and performance (optional, but if provided, must be included in file) |

BEFORE THE DEPARTMENT/UNIT RECOMMENDATION IS DETERMINED:

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| 5. _____ | _____ | Candidate was provided the opportunity to inspect all NON-CONFIDENTIAL documents to be included in the file. |
| 6. _____ | _____ | Candidate was given the opportunity to submit a written statement in response to or commenting upon material in the file within five (5) working days from receipt or inspection of non-confidential documents. Response due by _____ (date). |
| 6a. _____ | _____ | Candidate declines to submit a written statement. |
| 7. _____ | _____ | Candidate's written statement, if any, must be included in the file. |

AFTER THE DEPARTMENT/UNIT RECOMMENDATION IS DETERMINED:

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| 8. _____ | _____ | Candidate was given a copy of the department/unit assessment/letter. |
| 9. _____ | _____ | Candidate was given the opportunity to submit a written comment on the department/unit recommendation. Candidate has five (5) working days from receipt of copy in which to respond. Response due by _____ (date). |
| 10. _____ | _____ | Candidate declines to submit a written statement. |
| 11. _____ | _____ | Candidate's written statement, if any, must be included in the file, and may be submitted to the department/unit or directly to the dean. If submitted directly to the dean, it shall remain confidential from the department/unit. |

Signature of Candidate

Date

Signature of Unit Head

Date