**PROBATION PERIOD ASSESSMENT OF NEW FACULTY**

Department :………………………………………………………………………….. Semester :……………………………….………………

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| **Part I** | | **Personal Information:** | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | Name: | | | | | | | : | …………………………………………………………… | | | | | | | | I.D. No : | | | | | …………….…………………… | | | |
|  | | Date Starting | | | | | | | : | …………………………………………………………… | | | | | | | |  | | | | |  | | | |
|  | | Specialization | | | | | | | : | …………………………………………………………… | | | | | | | | Qualification: | | | | | …………….…………………… | | | |
|  | | Experience | | | | | | | : | ………………………………………………………………………………………………………………..………………………………. | | | | | | | | | | | | | | | | |
|  | | Skills | | | | | | | : | ………………………………………………………………………………………………………………..………………………………. | | | | | | | | | | | | | | | | |
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| **Part II** | | **Department Information:** | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | Job Title: | | | | | | | | ………………………………………………………………………………………………………………..………………………………. | | | | | | | | | | | | | | | | |
|  | | Teaching Load: | | | | | | | | …………………….……………… | | | No. of Courses Assigned : | | | | | | | | | | | ……………….…..…………… | | |
|  | | Courses Assigned: | | | | | | | |  | | | | | | | | | | | | | | | | |
|  | | (1) ………………………………………………………..………………………… | | | | | | | | | | | | | (2) ………………………………………………………..………….………....……… | | | | | | | | | | | |
|  | | (3) ……………………………………………………………..…………………… | | | | | | | | | | | | | (4) ………………………………………………………..………….………………… | | | | | | | | | | | |
|  | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| **Part III** | | **Class Observation:** | | | | | | | | | | | | | | | | | | | | | | | | |
| **S.#** | Day | | | **Time** | | | **Loc.** | | | | Course Title | | | **No. of Students** | | | | **LT** | | **LB** | **Primary Observation** | | | | | |
|  |  | | |  | | |  | | | |  | | |  | | | |  | |  |  | | | | | |
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| **Part IV** | | | **Evaluator’s Comments:** | | | | | | | | | | |  | |  |  | |  | | |
|  | | | * ……………………………………………………………………………………...………………………………………………….…………………..…………………… * ……………………………………………………………………………………...………………………………………………….…………………..…………………… * ……………………………………………………………………………………...………………………………………………….…………………..…………………… * ……………………………………………………………………………………...………………………………………………….…………………..…………………… * ……………………………………………………………………………………...………………………………………………….…………………..…………………… | | | | | | | | | | | | | | | | | | | | | | | |
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| **Evaluator’s Name** | | | | | | | | **Position** | | | | | | **Signature** | | | | | | | **Date** | | | | |