SWC
SOUTHWESTERN COLLEGE

FACULTY EVALUATION FORM B
BIBLIO/LIBRARY SERVICES FACULTY

LIBRARIAN/FACULTY NAME: **20**

SCHOOL/SERVICE AREA: **DEPARTMENT:**

EVALUATOR'S NAME: **TITLE:**

DATE OF VISITATION:

All PC and Mac users please note: This form must be opened using **Adobe Reader**; **any forms opened/used in "Preview Mode" will not function properly.**

DIRECTIONS: Every item must contain specific comments including an example to illustrate the evaluator's point and suggestions for improvement if applicable. Check the reference techniques that you observed being used.

TECHNIQUES BEING USED:

☐ **Individual Student Assistance**   ☐ **Internet**   ☐ **Library Automation System**

☐ **Electronic Databases**   ☐ **Electronic Books**   ☐ **Audio/Visual**

☐ **Other:** _____

1. Conduct reference interview and follow-through.	Select a rating that is most relevant from the drop down box (left). 8 – 10 = Strong │ 6 – 7 = Competent │ 4 – 5 = Marginal │ 1 – 3 = Unsatisfactory.

Comments:

Check here if continued on Addendum ☐

2. Acts in a manner that encourages patrons to ask questions.

Comments:

Check here if continued on Addendum ☐

Evaluation Scale: 8 – 10 = Strong | 6 – 7 = Competent | 4 – 5 = Marginal | 1 – 3 = Unsatisfactory

3. Knows and follows Reference Desk, and Library policies.

Comments:

Check here if continued on Addendum ☐

4. Exhibits teamwork regarding working at the Reference Desk.

Comments:

Check here if continued on Addendum ☐

**5. Exhibits knowledge of reference sources, continues
    to develop knowledge of collections and resources.**

Comments:

Check here if continued on Addendum ☐

Evaluation Scale: 8 – 10 = Strong | 6 – 7 = Competent | 4 – 5 = Marginal | 1 – 3 = Unsatisfactory

OVERALL NON-INSTRUCTIONAL ACTIVITY OBSERVATION SCALE:

SUMMARY EVALUATION COMMENTS:

Check here if continued on Addendum ☐

Evaluator's Signature: _____ Date:_____

Dean's Signature: _____ Date:_____

Dean Comments (Optional):_____

_____

_____

_____

_____

_____

Faculty Signature: _____ Date:_____

Faculty Comments (Optional): _____

_____

_____

_____

_____

_____