INTERVIEW EVALUATION FORM FOR COLLEGE FACULTY CANDIDATES CAMPUS INTERVIEW

Please complete this evaluation form, sign below and return to the Search Chair

DO NOT comment on applicant's age, race, sex, disability, national origin, religion, sexual orientation, marital or family status, veteran's status or genetic history.

Date of Interview:							
Candidate:							
Position:							
Department:							
Interviewer [please print name]:							
Based on your own observations and ir listed below on the following scale (if yindicate NC for no comment):	•						
	3 Acceptable Candidate	4				5 Excellent Candidate	
Relevant Educational Background:	NC	1	2	3	4	5	
Teaching Philosophy and Ability:	NC	1	2	3	4	5	
Research Potential:	NC	1	2	3	4	5	
Verbal Communication Skills:	NC	1	2	3	4	5	
Interpersonal Skills with Faculty and S	taff: NC	1	2	3	4	5	
Interpersonal Skills with Students:	NC	1	2	3	4	5	
Professional Demeanor:	NC	1	2	3	4	5	

1 2 3 4 5

Attitude towards Position and Campus: NC