

Resident Monthly Evaluation of Faculty

Instructions:

Please complete the following evaluation for the Faculty you worked with during your rotation. Your responses will remain confidential and will be summarized in order to provide feedback to the Faculty on his/her teaching and supervision skills.



Subject Name

Status
Employer
Program
Rotation
Evaluation Dates

Evaluated by:

Evaluator Name

Status
Employer
Program

1* Faculty's commitment to teaching and academic activities? If rated "Poor" please provide additional information in the Comments box below.

Excellent	Good	Fair	Poor
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Comment

2* Faculty's punctuality and availability during work hours. If rated "Poor" please provide additional information in the Comments box below.

Excellent	Good	Fair	Poor
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Comment

3* Respectfulness of Resident's dignity & status. If rated "Poor" please provide additional information in the Comments box below.

Excellent	Good	Fair	Poor
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Comment

4* Was the feedback provided by the Faculty timely, adequate, helpful, and appropriate? If rated "Poor" please provide additional information in the Comments box below.

Excellent	Good	Fair	Poor
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Comment

5 Please include any additional comments or suggestions if desired.

