

SUPPLEMENTAL TEACHING INFORMATION FORM

Persons proposed for faculty promotions or merit increases are asked, through their Department Chair, to supply this information about their teaching assignments.

Name: _____ Date: _____

I. Summer Session (not University Extension) Teaching Record – Course Number, Units, Enrollment, Evaluation:

(Year) Summer Quarter				(Year) Summer Quarter				(Year) Summer Quarter			
Course No./Title	Units	Enroll.	Eval.	Course No./Title	Units	Enroll.	Eval.	Course No./Title	Units	Enroll.	Eval.

Eval. = Indicate Y (Yes) if student evaluations of teaching were conducted for the course. Indicate N (No) if no evaluations were collected.

II. Other Teaching:
