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|  | SCIENCE ENRICHMENT PREPARATION (S.E.P.) PROGRAM North Carolina Health Careers Access Program The University of North Carolina at Chapel Hill CB# 8010 • Student and Academic Services Building South, Suite 2301  Chapel Hill, North Carolina 27599-8010  (919) 966-2264 • (919) 966-6109 fax  [http://nc-hcap.unc.edu](http://nc-hcap.unc.edu/) |

FACULTY APPRAISAL FORM

Directions: Please fill out this form in its entirety. Email the completed form to [sepprogram@unc.edu](mailto:sepprogram@unc.edu).

## NAME of Applicant Click here to enter text.

## NAME of person completing this form Click here to enter text.

TITLE Click here to enter text. UNIVERSITY Click here to enter text.

DEPARTMENT Click here to enter text. OFFICE ADDRESS Click here to enter text.

SCHOOL ADDRESS Click here to enter text.

TELEPHONE NUMBER Click here to enter text. EMAIL ADDRESS Click here to enter text.

1. How long have you known the applicant and in what capacity? (Provide dates, if possible).

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| Click here to enter text. |

1. The applicant, as compared with other students taught in recent years, ranks academically as follows (please select only one):

Top 5%  Top 10%  Top 25%  Average  Below Average

1. Please rank the applicant on the following traits, relative to other students you have taught.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Excellent  5 | Good  4 | Average  3 | Fair  2 | Poor  1 | No opportunity to observe | Comments |
| Intellectual Ability |  |  |  |  |  |  | Click here to enter text. |
| Communication Skills |  |  |  |  |  |  | Click here to enter text. |
| Emotional Stability |  |  |  |  |  |  | Click here to enter text. |
| Study Habits/Skills |  |  |  |  |  |  | Click here to enter text. |
| Attendance/Punctuality |  |  |  |  |  |  | Click here to enter text. |
| Comprehension |  |  |  |  |  |  | Click here to enter text. |
| Accuracy/Attention to Detail |  |  |  |  |  |  | Click here to enter text. |
| Maturity/Judgment |  |  |  |  |  |  | Click here to enter text. |
| Motivation/Perseverance |  |  |  |  |  |  | Click here to enter text. |
| Ingenuity |  |  |  |  |  |  | Click here to enter text. |
| Dependability |  |  |  |  |  |  | Click here to enter text. |
| Initiative/Industriousness |  |  |  |  |  |  | Click here to enter text. |
| Cooperative Attitude in group setting |  |  |  |  |  |  | Click here to enter text. |
| Leadership/Leadership Potential |  |  |  |  |  |  | Click here to enter text. |
| Ability to receive constructive criticism |  |  |  |  |  |  | Click here to enter text. |
| Ability to interact with people from diverse backgrounds |  |  |  |  |  |  | Click here to enter text. |
| Ability to accept change |  |  |  |  |  |  | Click here to enter text. |
| Ability to resolve conflicts |  |  |  |  |  |  | Click here to enter text. |
| Overall Interpersonal Skills |  |  |  |  |  |  | Click here to enter text. |

(Continued on back)

1. The major strengths of this applicant are:

|  |
| --- |
| Click here to enter text. |

1. The major weaknesses of this applicant are:

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| Click here to enter text. |

1. The ability of the applicant to successfully pursue a graduate or professional health program is perceived as follows (please select only one):

Excellent  Good  Average  Fair  Poor  Unsatisfactory

1. The applicant as an SEP candidate is (please select only one): Recommended with Confidence  Recommended

Recommended with Reservations  Not Recommended

1. Please provide any additional comments you deem pertinent to our consideration of this applicant.

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| Click here to enter text. |

SIGNATURE DATE