WINONA STATE UNIVERSITY

INDIVIDUAL PERSONNEL TENURE RECOMMENDATION – IFO

To be o	completed by the a	ppropriat	e dean:			
Name of Faculty Member Being Considered Date						
Reco					tion for:	
Depart	ment					
	A	the IFO/I greement p newal reco Preside	e: Article 25(D) of MnSCU Master provides for a non- mmendation to the int, but not for recommendation.)	☐ F	Fenure Probationary Non-Renewal Non-Tenure Track Non-Re Fixed-Term Evaluation	
these re	ecommendation for	rms to the		cate abstention	nember. The department cloon this form if you wish to	
	evaluation, each opment Plan.	of the foll	owing criteria sho	ıld be addressed	as outlined in the individu	al's Professional
1.	Demonstrated ability to teach effectively or to perform effectively in other current assignments.					
2.	Scholarly or creative achievement or research.					
3.	Evidence of continuing preparation and study.					
4.	Contribution to student growth and development					
5.	Service to the university and community.					
PLEASE WRITE YOUR RECOMMENDATION ON THE REVERSE SIDE OF THIS FORM.						
			tions, and recomm		ported by comments on ea	ch of the criteria are
RECO	MMENDATION (check ap	propriate categorie	s):		
Catego	ry:		D 1.1		N. D.	
Tenure:			Recommended for Tenure		Not Recommended for Tenure	Abstain
Probationary/ Non-tenure track			Recommended For Non-renewal		Abstain	
Fixed	l Term:					
				Signature of Evaluator		Date