

PEER EVALUATION OF FACULTY TEACHING

Faculty Member (print name)

Poor Fair Good Very Good Excellent Not Applicable Not Observed

(Circle Response)

1. Knowledge of subject matter
2. Organization of presentation
3. Development of topic/discussion in organized manner
4. Clarity of learning objectives
5. Adherence to stated teaching objectives
6. Communication of facts and ideas
7. Enthusiasm for teaching
8. Involvement of learners in the educational process
9. Instruction at appropriate level of learner
10. Professional characteristics when interacting with learners maturity, respectfulness, encouragement, humility, responsiveness to questions
11. Effectiveness of teaching aids
12. OVERALL ASSESSMENT

| |
|---|
| General Comments: _____ _____ |
| Strengths: _____ _____ |
| Suggestions for improvement: _____ _____ |

Date: _____ **Setting:** ___ Dept Grand Rounds **Primary audience:** ___ Medical Students
 ___ Research Seminar (mark all that apply) ___ Residents
 ___ Lecture ___ Faculty
 ___ Small Group ___ Graduate Students
 ___ Procedure setting ___ CME
 ___ Resident conference ___ Other
 ___ Other: _____

Evaluator: _____

I acknowledge that I have received a copy of this form: _____ **Date:** _____
Signature of Faculty Member

Please review with faculty member and return to departmental administrator