



APPENDIX C – PART 1

University of Central Florida Non-Unit Faculty Assignment of Duties Form

NAME		RANK	
COLLEGE		DEPT.	
EMPLOYMENT PERIOD	Term (SU, FA, SP)		Year

The following constitutes your assignment for the term indicated above. Your estimated percentage of total work time allotted to each section is assigned below. If the percent of time spent on activities is revised, a new assignment form needs to be completed by your chair or unit supervisor. Your reported activity total may not exceed 100%.

Split Assignments: Three columns are provided for entries in each activity category to assist with recording possible assignments to more than one department or unit. For convenience, these are termed the primary, secondary, and tertiary assignments. For most faculty, only one column will need to be completed, in which case the one (primary) chair or supervisor should sign the form. Where secondary and perhaps tertiary assignments occur, the secondary and tertiary supervisor approvals and signatures should be included as well.

Annual Evaluation: As directed by UCF Regulation 3.010 all full-time and part-time faculty are to be evaluated each academic year. The employee's performance of assigned activities falling under sections I, II, III, IV, & V below are subject to such evaluation. The employee's assignment(s) for the period under evaluation is (are) to be attached to the annual evaluation.

	Primary	Secondary	Tertiary	Total
I. Instructional Activities				

Instructional activity includes direct delivery activities (e.g., lectures, workshops, and seminars) as well as activities that support instruction such as class preparation, evaluation of student work, library faculty instruction, supervision of clinical practicums, and laboratory instruction. Work related to thesis and dissertation responsibilities, directed individual (i.e., independent) studies, experiential learning and intern/field placement & supervision are also included. Other duties may include graduate student teaching & research supervision, mentoring graduate teaching assistants, secondary instructional site travel if over 2 hours per course meeting, and development/improvement/revision of materials or teaching methods. Program planning, development, and evaluation and academic student advising may count as Instructional Activities (I), Service (III), or Other Assigned Duties (IV), but may not be counted in more than one section.

	Primary	Secondary	Tertiary	Total
II. Research & Creative Activities				
C&G				
E&G				

Research and Creative Activities include, but are not limited to conducting research, developing creative works, preparing articles or books for publication, writing grant or contract proposals, performing or exhibiting works, and presenting at professional meetings or conferences essential to remaining current in one's field. **Please distinguish between percent of time assigned to contract and grant (C&G) activities and other assigned research and creative activities (i.e., activities supported by Educational and General (E&G) funds).**

	Primary	Secondary	Tertiary	Total
III. Service				

Service includes activities entered into with professional, academic, student, or community associations. Examples can include contributions to the department, unit, college, university, State, K-12 education, professional associations, community organizations, and governmental boards, agencies, and commissions. Contributions can be on the local, state, regional, national, and international levels. Effort for university governance activities (e.g., Faculty Senate) should also be recorded here.

	Primary	Secondary	Tertiary	Total
IV. Other Assigned Duties				

Other Assigned Duties, may include, but are not limited to, attending commencement ceremonies, advising, counseling, supervision of interns, academic administration or other position-specific activities that would be additional to or in place of regular duties (e.g., as described in the employee's position description or annual evaluation standards).



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V. Leave of Absence with Pay	Primary	Secondary	Tertiary	Total

Approved leaves with pay are primarily for sabbatical or professional development. Note: Employees' performance while on paid leave is to be included in the annual evaluation. If such leave cuts across two evaluation periods, activity performed during the leave should not be evaluated until the leave is completed. Where a report is required that summarizes the employee's accomplishments during such leave (e.g., sabbatical and professional development leave programs), the employee should submit the report within the time frame specified in the respective program's provisions.

OVERALL ACTIVITIES Note: TOTAL must be ≤ 1.00	Primary	Secondary	Tertiary	TOTAL

SIGNATURES:

EMPLOYEE: By signature below, I acknowledge that I have read and followed university regulations related to employee assignments and evaluations. I may be assigned off-campus instruction as part of my regular academic assignment. I further acknowledge that as an instructional faculty member, I am required to establish and post weekly "office" hours and to make myself available to meet with students during those posted times.

SUPERVISOR: By signature below, I acknowledge that I have read and followed the university regulations related to employee assignments and evaluations.

SIGNATURES: PRIMARY ASSIGNMENT			
Department Chair or Supervisor	Date	Faculty Acknowledgment	Date

SIGNATURES: SECONDARY ASSIGNMENT			
Department Chair or Supervisor	Date	Faculty Acknowledgment	Date

SIGNATURES: TERTIARY ASSIGNMENT			
Department Chair or Supervisor	Date	Faculty Acknowledgment	Date

cc: Faculty Member
Faculty Evaluation File
Department Chair or Supervisor



APPENDIX C – PART 2

DEPARTMENTS OF CLINICAL SCIENCES, INTERNAL MEDICINE AND MEDICAL EDUCATION

College of Medicine

University of Central Florida

ANNUAL WORK ASSIGNMENT FOR FACULTY

Name:		Assignment for calendar year:	
Date of Initial Appointment:		Department	
Academic Rank:		Years in Rank	
Selected mission of excellence (for promotion):			

This document is a part of the annual goal setting and evaluation process of COM. When you joined the faculty you signed a letter of offer that specified your rank, term, initial salary and your general responsibilities. This is a more specific document that describes your assignment and goals for this year with a focus on progress toward your promotion. It also allows you to list the progress you made during the last year. This document has three parts: your draft of goals, the supervisor's assignment in response to those goals, and end of the year progress report that includes a summary table.

All faculty will demonstrate proficiency in all areas (instruction, research, clinical service, service) of their involvement and this is required for contract renewal. For promotion you will need to demonstrate excellence in the area (instruction, research, clinical service, service) of your greatest assignment (highest percentage effort). You should familiarize yourself with the standards for demonstrating excellence and proficiency in the areas of instruction, research, clinical and community service so that you are clear on what you need to achieve to be promoted.

NAME _____	DRAFT GOALS FOR Calendar Year _____
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To be completed by **faculty member**. This is a draft of your proposed percentage effort and goals for the next calendar year.

Activity and percentage	Goals
1. Instructional activities	
____%	
2. Research/scholarship	
____%	
3. Clinical Service (if appropriate)	
____%	
4. Service (univ., community, professional)	
____%	
5. Other Assigned Duties	
____%	

I will need the following resources for professional development:

NAME _____	ASSIGNMENT for Calendar Year _____
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Final Assignment to be completed by **supervisor**.

Activity and percentage	General assignment and specific goals
1. Instructional activities	
____%	
2. Research/scholarship	
____%	
3. Clinical Service (if appropriate)	
____%	
4. Service (univ., community, professional)	
____%	
5. Other Assigned Duties	
____%	

I will provide the following resources for professional development:

Department Chair or Associate Dean

Date

I hereby accept these expectations as outlined.

Faculty

Date

*Form modified with permission from Touro Medical School.