**Faculty Development Evaluation of Completed Project**

Due 2 weeks after Faculty Development Activity

**Date:** Click or tap here to enter date or to access calendar.

**Name:** Click or tap here to enter text.

1. Describe the project, including date, location and nature of your involvement.

Click or tap here to enter text.

1. Evaluate the strengths and shortcomings of the project.

Click or tap here to enter text.

1. How, **specifically**, has this project enhanced your growth as a teacher and scholar, thereby supporting exceptional student learning?

Click or tap here to enter text.

1. What **specific** plans do you have to implement what you have gained from the project?

Click or tap here to enter text.

1. In what **specific** ways are you going to share what you have gained from your project with other faculty members, administrators, and/or others outside the university?

Click or tap here to enter text.

1. Based on what you have gained from your project, what specific recommendations do you have for the improvement of instruction or scholarship at the university (e.g. some new procedure for your department or the university as a whole, an idea for a workshop, a presentation at fall faculty, academic symposiums, etc.)?

Click or tap here to enter text.

1. Other Comments

Click or tap here to enter text.