Course Selection Form

Instructor_____

Course Name_____

Course Prefix and Section_____

Meeting Days and Times_____

Meeting Location_____

Number of Students_____

Chosen by: _____Department Chair

_____Instructor

Signatures:

_____ _____

Department Chair Date

_____ _____

Instructor Date

Course Selection Criteria:

- Permanent status faculty will be evaluated in one course section each semester (fall and spring). The course will be chosen by the Department Chair one semester and by the faculty member the other semester.
- Faculty in their first three years of employment with NEO will be evaluated in each course taught in both Fall and Spring semesters.