Martin-Gatton College of Agriculture, Food and Environment

Faculty Post-Retirement Performance Evaluation Form

Complete this form as part of the reappointment process

Post Retiree's Name: _____ Academic Unit: _____

Post-Retirement Re-appointment Start Date: _____ End Date: _____

Summary of Position Responsibilities:

Academic Unit Leader's Assessment:

Strengths:

Suggestions:

Post-Retiree Comments (optional):

Academic Unit Leader certifies this post-retiree is meeting or exceeding performance expectations and funding is available for the continuation of this position.

_____
Post Retiree's Signature

_____
Academic Unit Leader Signature

_____
Date

_____
Date

Include this signed evaluation form with submission of the Post-Retirement Appointment Form.