

Los Angeles Community College District

Summary Evaluation of College President/ Academic Vice Chancellor

(Form to be completed by Chancellor)

Evaluee Name	College
Evaluation Period	Chancellor Name
Annual Basic Evaluatio	n Comprehensive Evaluation
(Check type of evaluation)	
From the following categories	below, please choose the rating that best signifies your evaluation.
EVALUATION CATEGORIES: Text box	below contains character limit. Attach additional sheet(s) if needed
Leadership Skill and Ability Rating: Strongly Agree Agree Consider the ability to take initiative, buil positive campus climate. Comments and /or Suggestions:	E Disagree Strongly Disagree Not observed or inadequate basis to comment
Communication Skill and Ability Rating: Strongly Agree Agree	e Disagree Strongly Disagree Not observed or inadequate basis to comment

Consider communication skills in written and oral form including listening skills and proper dissemination of information to staff in areas of responsibility.

Comments and /or Suggestions:

Advantations (Advances and Shill and Ability
Administrative/Managerial Skill and Ability
Rating: Strongly Agree Agree Disagree Strongly Disagree Not observed or inadequate basis to comment
Consider the ability to organize, delegate and fulfill responsibilities. Ability to establish goals and objectives, and develop plans to achieve results. Ability to identify causes of problems, recognize critical elements of the problem, solve them effectively and willingness to accept responsibility for decisions.
Comments and /or Suggestions:
Professional Knowledge and Expertise
Rating: Strongly Agree Agree Disagree Strongly Disagree Not observed or inadequate basis to comment

Use of Assessment Results to Improve Instructional and Instructional Support Services	
Rating: Strongly Agree Agree Disagree Strongly Disagree Not observed or inadequate basis to comment	
Consider the extent to which learning outcome assessment results are used to participate in discussion, processes, and/or make improvements to instructional and instructional support programs, teaching and student learning	
Comments and /or Suggestions:	

Authority and Support	
Rating: Strongly Agree Agree Disagree Strongly Disagree Not observed or inadequate basis to comment	
Consider ability to carry out duties and the delegation of authority and support to do so.	
Comments and /or Suggestions:	

Step Advance Recommendation (To be completed by Chancellor) No recommendation for Step Advancement (Overall needs improvement, i.e., a rating of Disagree on two or more rating criteria)

One Step Advancement (Requires an Overall Satisfactory evaluation)

Evaluee Name (Print) **Evaluee Signature** Date **Chancellor Name (Print) Chancellor Signature** Date

*Employee may attach a statement to this form if the signature does not represent agreement with the contents.