

Faculty Candidate Evaluation Form

Candidate: _____ College: _____

Subject Area and Research Interests: _____

The Highest Degree (Including university name, discipline and year of graduation):

Current Professional Title: _____

Key Publications (details should be given):

1. _____

2. _____

3. _____

Is the external assessor familiar with the Candidate's subject area and research interests?	Very familiar <input type="checkbox"/>	Relatively familiar <input type="checkbox"/>	Not familiar <input type="checkbox"/>
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Comprehensive Evaluation

1. How would you evaluate the Candidate's research activity? Very Active Active Fair No basis for judgment

2. How would you evaluate the originality of the Candidate's research? Very Strong Strong Fair Weak

3. How would you evaluate the technical depth of the Candidate's research? Excellent Good Fair Poor

4. How would you rank the Candidate among his/her peers? Leading Higher Fair Lower

5. How would you evaluate the Candidate's contributions to this field? Outstanding Great Fair Few

6. How would you evaluate the Candidate's research potential? Outstanding Great Fair Weak

Detailed evaluate of the Candidate

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The Candidate's academic level is equivalent to what kind of academic title in your university or institute?	Full professor	Associate professor	below associate professor
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Signature:	Date:
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Area of expertise	
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Current Professional Title	
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E-mail address	
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University/college/research institute	
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