Faculty Feedback Project Proposal Form

Name: ___________________________ Date: ________________

Department/Program: _______________________________________________________

The desired outcomes of a Faculty Feedback Project are to …

• improve student learning,
• enhance teaching, and
• build a sense of campus community.

In what area would you like feedback?

☐ Presentation Style  ☐ The Course as a Whole
☐ Testing and/or Evaluation  ☐ Course Content
☐ Small Group Work  ☐ Course Materials (syllabi, textbooks, handouts)

☐ Other (Please specify):

Specifically, in relation to the above topic(s), what type of feedback are you interested in acquiring?

List and/or describe the activities planned for acquiring the above feedback during the semester. (Please note that feedback must be obtained throughout the semester as well as at the end.):

-Please see reverse side-
At the end of the semester, how will you assess the impact of any changes you have implemented (or intend to implement) as a result of your initial findings?

What resources will you need to support your Faculty Feedback Project? (Please note that if you need support/resources beyond the CTE, you will need to speak to your Dept. Chair before beginning your project.)

Name(s) of colleague(s), team, or group who you will share the results of your feedback project with:  (Please note that faculty are encouraged to share the results of the projects with their programs and/or departments.)

_______________________________________________________________________

_______________________________________________________________________

Important Dates

Approximately when will you initiate your feedback project? ___________________

________________________________________________________________________

Approximate date(s) when feedback will be shared: __________________________

________________________________________________________________________