**PHASE II** TENURE REVIEW SCHEDULE FORM **DATE:**   
(3 Quarters: Spr; Fall/Wtr)

*To be completed by Chair, with copies to committee members, candidate, and TR Coordinator* ***within 5 days of 1st meeting of Phase*** *(weeks 2-4); if changes or meetings/evaluations added, Chair distributes revision.*

**Candidate Name Department Email Phone Extension**

**Tenure Review Coordinator:** Shagun Kaur [kaurshagun@fhda.edu](mailto:kaurshagun@fhda.edu)

Core Committee: Chair

* division dean
* div/dept faculty
* div/dept faculty

Vice President At-Large Faculty

***Minimum required meetings: 4***

***Minimum required evaluations: 4 observations (J1); 4 student evaluations (J2)***

Schedule of 4 required meetings

|  |  |  |
| --- | --- | --- |
| Qtr/weeks | Meeting Purpose | Date (or wk) |
| Spr/wks 2-4 | **Meeting 1**: to review Phase I, set dates for Phase II activities; with candidate, to discuss expectations, dates of evaluations; candidate submits relevant materials for evaluations. (*Or two separate meetings.)* |  |
| Spr/wks 4-10 | **Meeting 2: part 1** closed session to review all evaluations; and **part 2** with candidate to discuss performance/evaluations, offer suggestions for improvement *(Or two separate meetings.)* |  |
| Fall/wks 6-9 | **Meeting 3: part 1** closed session to discuss evaluations, schedule extras; and **part 2** with candidate to discuss performance/evaluations, offer suggestions for improvement.  *(Or two separate meetings.)* |  |
| Winter/wk 4 | **Meeting 4: part 1** with candidate to review Fall J2s, performance; and **part 2** closed session to prepare Phase II report. *(Or two separate meetings.)* |  |
| Winter/wk 5 | Meeting or designated member(s) to inform candidate of recommendation |  |
| (extra) |  |  |

Schedule of 4 required observations, ***1 by each committee member except VP*** (Spr/Fall, weeks 4-7)

|  |  |  |
| --- | --- | --- |
| Committee Member | Class/Task | Date (or qtr/wk\*)  ***\*****Candidate given date at least 1 wk prior* |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| (extra J1 by VP, at their discretion) |  |  |
| (extra J1 committee) |  |  |

Schedule of 4 required student evaluations (Spr/Fall, weeks 6-9; ***not*** during same class period as J1)

|  |  |  |
| --- | --- | --- |
| Committee Member | Class/Task | Date (or qtr/wk\*)  ***\*****Candidate given date at least 1 wk prior* |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| (extra J2) |  |  |

Please contact the Tenure Review Coordinator with any questions. Revised: October, 2023