

UTF Assessment Form by Faculty Member

Only required the first time using a particular student as a UTF during an academic year; optional thereafter. Submit electronically to your Associate Dean and Vice Provost Larry Smith. Please submit within one week after the conclusion of the semester. Your response helps us improve this program and gives students meaningful academic employment.

Name:

Email Address:

Name of the UTF:

Class Name and Number:

Number of Students Enrolled in the Class:

Number of semesters you have worked with the UTF program:

Use the following questions as a guide; you may answer any or all.

Briefly describe your experience as a faculty mentor to a UTF; what roles did the UTF have in your class?

In what areas did students seem to need the UTFs assistance most? List the three most popular.

What worked well for you? Highlights?

What do you feel needs work?

How could the experience have been improved by something we could have done at the college level or centrally?

What suggestions do you have for improving the UTF Program?

Will you continue to request UTFs? Why?

Did your teaching change in any way as a result of being involved with this program?

Other comments?