**REASSIGNED TIME PROJECT EVALUATION FORM**

**INSTRUCTIONS**

The attached Reassigned Time Project Evaluation Form should be submitted upon completion for each released time project. Evaluation Forms need not be completed for program coordination or membership on committees such as AAUP, Faculty Senate or Governance.

* This form can be submitted either in hard copy through inter-campus mail or via e-mail.
* The project number can be obtained from your division office. (The Project number is noted on the Released Time Status Spreadsheet sent to the Deans)
* Should you have any questions regarding your project or completion of this form, check with your division office or call Nancy Kreigh, Office of Access, Learning and Success, ext. # 0480.

**ACADEMIC YEAR**

**REASSIGNED TIME PROJECT EVALUATION FORM**

Name:       Date:

Project Number:       ESUs:

Title of Project:

Fall Semester:       Spring Semester:

***(NOTE: Additional pages may be used as needed. Attach all supporting materials.)***

1. Statement of project objectives accomplished:
2. Results of project implementation:
3. How will project results be used in the future?
4. Plan for dissemination of results to college community:

***Please send completed form to:***

***Nancy Kreigh, Access, Learning and Success, District Office.***