

**FORM 14: CHECKLIST FOR RECONTRACTING
FOR PROFESSIONAL STAFF / COACHES**

CANDIDATE NAME _____ **DATE HIRED** _____

OFFICE / DEPARTMENT _____ **PHONE EXT.** _____

COMMITTEE CHAIRPERSON _____ **PHONE EXT.** _____

PROFESSIONAL STAFF / COACHES within the bargaining unit appointed after December 31 of the current year shall be reviewed the following year as a first-year candidate. The Department Recontracting Chair must initial on blank lines under "Initials." Please number the pages of the recontracting file and collate in the order listed, and include the corresponding starting page number where indicated.

Start Page	CHECKLIST	Initials
_____	1. Checklist	_____
_____	2. Evaluation Criteria	_____
_____	3. Current Job Description	_____
_____	4. Rowan University Recontracting Application and Credentials	_____
_____	5. Self-Assessment, including: <ul style="list-style-type: none"> • Professional Performance • Professional Development • Service to the University Community • Service to the Wide and Professional Community 	_____
_____	6. Plans for Future Professional Growth	_____
_____	7. Supervisor's Evaluation	_____
_____	8. Department/Office Recontracting Committee's Evaluation, including numerical vote, minority report(s) if required, and names and signatures of committee members and chairperson	_____
_____	9. Previous Evaluations (as applicable) <ul style="list-style-type: none"> • First Review (Supervisor Only) • Second Review (Supervisor, Department/Office) 	_____
_____	10. Supplemental Folder	_____