

**Stony Brook University Medical Center**  
**Faculty Evaluations/ Performance Expectations SCIENTIST SAMPLE**

**Faculty Name:** JANE DOE PhD

**Date of Evaluation:** 6/30/08

**Evaluator Name:** DIVISION CHIEF/CHAIR MD,PhD

**Percent FTE=** 100%

**FTE distribution: (Must add to 100%)**

**Clinical=0 % Research= 70 % Teaching= 20 % Admin= 10 %**

**MISSION AREA B: RESEARCH ACTIVITIES**

Check N/A if not applicable

<b>Performance Metric</b> (consider quantity and quality)	<b>Current level</b>	<b>Departmental Expectations</b> (Unmet, met, exceeded)	<b>Expectations/Goals for upcoming year</b>
<b>Publications:</b> Number and Journal Impact factors	5 peer reviewed, IF=2.5 to 13 1 review article	Exceeded	Two papers expected next year
<b>Presentations:</b> Number and geographic impact	2 International Platforms 2 National Platforms 1 National workshop 1 National poster	Exceeded	Continue current level
Intellectual Products	-	-	May apply for a patent next year
Mentoring	Two post docs in lab Two medical students One resident Three fellows	Exceeded	Continue current level
<b>Grant Activity</b>	\$3,000,000, R01 grant (2007-2010) 450,000 grant from Kellogg Foundation (2007-8) 150,000 grant from Cystic Fibrosis Foundation	Exceeded	Continue current level
Other activities(	Reviewer for 2 journals	Met	Continue current level

editor, reviewer)			
Other:	Organized a national workshop on Proteomics	Exceeded	Continue current level

**Additional Comments by Chair:** Dr Jane Doe is her fifth year and her most productive year at the institution. She has successfully competed to receive her RO1 grant and is mentoring several trainees in her lab. I am confident of her success as a researcher and would like to put her up for promotion and tenure in the upcoming year.

**Additional Comments by Faculty member:** It is my intent to submit for a patent this year on xxx. Would like to attend the International xxx foundation meeting at xxx, and is hoping for departmental support for this to enhance my professional skills in this area as well as my chances at international collaboration for this project.

**MISSION AREA C. EDUCATIONAL ACTIVITIES**

Check N/A if not applicable

Performance Metric (consider quantity and quality)	Current level	Departmental Expectations (Unmet, met, exceeded)	Expectations/Goals for upcoming year
Faculty member's teaching	10 hours for fellows	Met	Continue current level
Learner Evaluations	Average	Met	Continue current level
Curriculum Development	-	-	-
Mentoring/Advising	Two post docs in lab Two medical students One resident Three fellows	Exceeded	Continue current level
Educational Leadership/Administration	-	-	-
Other activities( editor, reviewer)	-	-	-
Educational Scholarship:	-	-	-

**Additional Comments by Chair:**

Dr Doe is heavily focused on research and does an acceptable job with the trainees in her lab.

**Additional Comments by Faculty member:**



I have reviewed the above performance evaluation and expectations document with the faculty member:

**Signed: Evaluator CHAIR MD**

I have received a copy of the above performance evaluation and expectations document from my supervisor. My signature does not necessarily indicate that I agree with the evaluation. I have the option to discuss this with the Faculty Assistance Committee, School of Medicine. The website for the committee is <http://www.stonybrookmedicalcenter.org/body.cfm?id=1383#fac>.

**Signed: Faculty Member: JANE DOE MD**

**Additional Comments by Faculty Member:**

**If the faculty member refuses to sign the document, please complete section below**

The above faculty member refused to sign the performance evaluation and expectations document.

Signature of Chair/Reviewer: \_\_\_\_\_ n/a \_\_\_\_\_

Name and Signature of Witness: \_\_\_\_\_ n/a \_\_\_\_\_