Action Plan Form

This form is designed to provide a formal plan of action for the tenure track faculty member who has received a rating of “Significant Concern” on any portion of their Classroom Observation Form done by the Department Chair (or designee) or member of the Administration.

**This Action Plan should be:**

* done immediately after the Classroom Observation concludes (since a “Significant Concern” warrants immediate intervention)
* completed in consultation with the TAP Leader.
* given to the Tenure Track Faculty Member and discussed in person to go over the terms and details *AND* given to the TAP Leader in order to be knowledgeable of additional deadlines and requirements.
* attached to the formal Classroom Observation Form and included in the portfolio
* listed in the last section of the Classroom Observation Form titled “Additional Comments” as being attached.

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| Instructor’s Name |  | Class and Section Observed |  |
| Observer’s Name |  | Date of Observation | **Click here to enter a date.** |
| Relation of Observer to Instructor |  | Number of Students Enrolled |  |
| College | **Choose an item.** |

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| Description of the Significant Concern(s) Noted by the Observer |
| Summarize the “Significant Concern(s)” that was noted on the Classroom Observation Form. Indicate which section heading of the Observation Form your concern is addressing. |

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| Describe the Action Plan Prescribed |
| Provide the actions that you suggest the faculty member to complete. |

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| Describe the Action Plan Timeline |
| Provide the dates and deadlines for any Action Plan activities or recommendations being made. |

Observer Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: **Click here to enter a date.**

Tenure Track Faculty Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: **Click here to enter a date.**