

Napa Valley College

Acknowledgement of Full-Time Temp/Grant Funded Faculty Evaluation Review Team Confidentiality

Evaluatee: _____

Each person who is on a Full-time Temp or Grant funded Faculty Evaluation Team at Napa Valley College agrees to adhere to the following:

1. I support the College policy that requires we provide equal employment opportunity for all persons without regard to race, color, ethnicity, sex, age, disability, religion, marital status, or sexual orientation.
2. I understand that I must make all decisions regarding the faculty member entirely on the basis of the evaluatee's ability to perform the duties and responsibilities of the position.
3. I understand that I am participating in a confidential process. To protect the privacy of the evaluates and to eliminate personal and district liability, I agree not to discuss any information or proceedings related to the process, now or in the future, with anyone but other members of the team, the Academic Senate 2nd VP, and the FCC or college administration, only as appropriate. I further agree not to allow materials to be viewed by unauthorized persons.
4. I accept the responsibility to participate in this process in a collegial and professional manner. If, at any time, I believe proper procedures are not being followed, I will contact the Academic Senate 2nd VP.
5. I do not have any known conflict of interest that could compromise my ability to fully carry out the role and responsibility described in this document or in the process.

Please print your name:

Please sign your name:

Date

Deliver to the Academic Senate Office