CANR EXCELLENCE IN GRADUATE STUDENT TEACHING AWARD CHECKLIST

ONE COPY of the materials listed below.
NO NOTEBOOKS or STAPLES. Please arrange materials in the following order:

I. TEACHING PHILOSOPHY STATEMENT. Candidate should provide this. No more than 3 single spaced pages.
   a. Candidate’s teaching philosophy.
   b. Description of philosophical implementation.
   c. Assessment of impact- How do you determine its effectiveness?

II. EVIDENCE OF TEACHING EXCELLENCE addressing the following criteria (please use the headings to distinguish each component). No more than five pages.
   a. Undergraduate Credit Instruction:
      i. Record of instructional activities. Include only actual participation in credit courses (on- or off-campus instruction) or virtual university on-line courses.
   b. Non-Credit Instruction:
      i. List other instructional activities including non-credit courses/certificate programs, licensure programs, conferences, seminars, and workshops.
   c. List of Instructional Works:
      i. List publications, presentations, papers, grants received and other works that are primarily in support of or emanating from instructional activity.
   d. Other Evidence of Instructional Activity:
      i. Cite other evidence of instructional productivity such as works/grants in progress or under review Address instructional goals and approaches; innovative methods or curricular development; significant effects of instruction. Include evidence of instructional awards and peer recognition.

III. STUDENT INSTRUCTIONAL RATING SYSTEM EVALUATION OF TEACHING
   a. Fill in the Table provided (page 3).
   b. Provide ONE COMPLETE set of SIRS forms from one class (if more than one section taught, only submit for one section), including responses to open-ended questions. Unit-specific student evaluations other than SIRS are acceptable.

LETTERS OF SUPPORT. (No more than three). (APPLYING SPECIFICALLY TO THE AWARD). In every instance, the nomination must be accompanied by a letter of recommendation from the faculty member who has or had supervisory responsibility for the graduate student teaching and must be co-signed by the Chair of the candidate’s home department. Another letter must be secured from a student that the candidate has taught. It is imperative that each letter of support be signed by the author or an individual who represents a collection of authors. Unsigned letters should not be included in review packets.
<table>
<thead>
<tr>
<th>Course (Credits)</th>
<th>Semester, Year</th>
<th>Enrollment</th>
<th>Type of Course¹</th>
<th>Course Structure²</th>
<th>Provide KEY: e.g., 1=Superior ... 5=Inferior</th>
<th>SIRS Composite Profile Factors (Mean)³</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
<td></td>
<td>Instructor Involvement</td>
<td>Student Interest</td>
</tr>
</tbody>
</table>

¹ For example, integrative studies, majors (undergraduate or general), freshman, sophomore, upperclass, required or not required.
² For example, discussion, large lecture, small lecture, lecture/lab, or teaching assistant involvement.
³ Found on SIRS Summary Printouts obtained from Scoring Office.
COLLEGE OF AGRICULTURE AND NATURAL RESOURCES
EXCELLENCE IN GRADUATE STUDENT TEACHING AWARD

(Please complete and include this DATA FORM as a cover sheet to the candidate’s nomination materials with submitted materials due February 11, 2013.)

I. DATA FORM

NOMINEE:
Nominee: ________________________________

IMPORTANT: PRINT NAME AS IT SHOULD APPEAR ON THE AWARD

Address (Office) ___________________________ (Home) ___________________________

________________________________________

Phone ___________________________ Phone ___________________________

E-mail ___________________________

Department(s) 4 __________________________________________________________________

List the semesters and classes that you are teaching during the 2012-13 academic year

_____________________________________________________________________________

NOMINATOR:
Nominator: ________________________________

Academic Rank/Title: ________________________________

Department(s) ________________________________

Address ________________________________

Phone ___________________________ E-mail ___________________________

4Please list joint appointments, listing primary appointment first.