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## **University of Guam**

## College of Natural & Applied Sciences Cooperative Extension & Outreach

## **Comprehensive Faculty Evaluation System (CFES)**

| Your name: Aubrey Moore  |  |
|--|--|
| Your current Rank and Step: Profes   | ssor   |
| This CFES/POW evaluation period: June 15, 2018 – June 14, 2019   |  |
|  |  |
| Role Assignments   | Percent of Time                              |
| Extension & Outreach   | 51% (primary focus must be a minimum of 50%) |
| Creative/Research/Scholarly  | 34%  |
| Instruction  | 0%   |
| University Service   | 15%  |
| TOTAL  | 100%   |
| Please list any outside consulting or paid board activities for this performance period: None.   |  |
| I have met with my appropriate administrative supervisor and discussed my evaluation plan for the period above cited. I understand that amendments to my plan are possible and that said amendments, if any, are to be discussed with and agreed upon by my administrator prior to initiating. |  |
|  |  |
| Signature of Faculty   | Date:  |
| Signature of Associate Dean  | – Date:                                      |
|  |  |

Date:

Signature of Dean/Director