



Postdoctoral Scholar Annual Evaluation

Name of Postdoctoral Scholar: _____

Department/Program: _____

Name of Mentor: _____

Date of Review: _____

Evaluation Dates: _____ - _____

Campus: ☐ Tampa ☐ USF Health ☐ St. Petersburg ☐ Sarasota-Manatee

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1. List the postdoctoral scholar's goals and objectives identified at the start of this evaluation period.

2. Summarize the postdoctoral scholar's success in achieving the goals and objectives.

3. List the areas of strength / opportunities for improvement of the postdoctoral scholar.

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4. Describe how the postdoctoral scholar was mentored during this evaluation period.

5. Describe professional development engaged in during this evaluation period.

6. List the goals and objectives of the postdoctoral scholar for the upcoming evaluation period.

7. Comments.

Postdoctoral Scholar Signature

Date

Mentor Signature

Date