

**Faculty Development Office
Internal Project Evaluation - Faculty Development Program**

Project # : _____ Date: _____

Has the grant recipient provided adequate evidence that the project objectives and project outcomes have been met?	Yes	No
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If "No," has the grant recipient adequately explained why the project objectives and project outcomes were not met?	Yes	No
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Has the grant recipient provided an adequate explanation of professional development?	Yes	No
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Recommended Action for Project File:

- _____ Closed
- _____ Deferred (pending additional information)
- _____ Past Due (first)
- _____ Past Due (continued)

Comments:

Evaluator's Signature: _____