**Title Promotion Evaluation Criteria & Evaluator Comments Form**

**Name:**  **County/District:**

**Title being sought:**   **Associate Agent**   **Agent**

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| **Program Planning** | | |
| No evidence of program planning based on the identification of community needs. | Identified and substantiated a compelling need for the program using community, advisory group and stakeholder input. | Evidence of data informed collaborative efforts to prioritize local needs that align with Extension state priorities, expertise, and emerging issues. |
| **Needs Improvement** | **Good** | **Excellent** |
| Comments: | | |
| No evidence of systematic planning or rationale for why program activities would lead to behavioral change. Educational programs were not appropriate for the target audience or the needs of the community | Used a program planning framework to develop a comprehensive program and articulated links between program activities and program outcomes. Identified and selected appropriate content for the intended audience. | Addressed an issue impacting multiple audiences using multiple methods to reinforce practice or behavior change. Planned innovative educational programs using timely research-based resources. |
| **Needs Improvement** | **Good** | **Excellent** |
| Comments: | | |
| No evidence of collaboration with internal or external groups or partners to establish programs. | Evidence of collaborating with internal and external partners to plan programs activities. | Internal and external partnerships resulted in shared planning efforts and the ability to meet additional needs and/or reach previously underserved audiences. |
| **Needs Improvement** | **Good** | **Excellent** |
| Comments: |  |  |
| No evidence additional funding to support the program. | Secured additional funding and/or resources to support the program. | Secured significant or ongoing funding and resources to support the program. |
| **Needs Improvement** | **Good** | **Excellent** |
| Comments: |  |  |

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| **Program Delivery** | | |
| No evidence of a comprehensive approach and/or selection of appropriate educational strategies or methods. | Comprehensive program utilizing appropriate educational strategies and teaching methods to deliver timely, research-based programs and services to help clientele solve identified issue. | Evidence of multiple strategies to accommodate different learning styles and the use of multiple tiered methods that reinforce learning. |
| **Needs Improvement** | **Good** | **Excellent** |
| Comments: | | |
| No evidence of effective use of current technology in program delivery. | Used current, new and emerging technologies, and appropriate equipment and devices to offer learning in interactive and appropriate ways. | Used current and new technology in innovative ways enhance learning, reach new audiences, or meet specific audience needs. |
| **Needs Improvement** | **Good** | **Excellent** |
| Comments: | | |
| No evidence of collaboration with internal or external groups or partners to deliver programs. | Collaborated with internal and external partners to deliver educational programs. | Partnerships resulted in program expansion, meeting additional needs or reaching new or previously underserved audiences. |
| **Needs Improvement** | **Good** | **Excellent** |
| Comments: | | |
| No evidence of using volunteers to assist with program delivery. | Active volunteer system to deliver, support and promote Extension programs. | Evidence of providing opportunities for volunteers to assume leadership roles. |
| **Needs Improvement** | **Good** | **Excellent** |
| Comments: | | |

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| **Program Results** | | |
| Did not evaluate teaching effectiveness and/or did not use evaluation results to improve teaching effectiveness. | Collected and used end of session feedback (teaching effectiveness) to improve the quality of program delivery (satisfaction data). | Participated in professional development to improve skills in identified areas or made substantial course changes based on feedback. |
| **Needs Improvement** | **Good** | **Excellent** |
| Comments: | | |
| Programs seldom achieved outcomes or results. | Program resulted in documented outcomes (changes in target audiences’ knowledge, application of practice, or behavioral change). | Evidence that programs resulted in the application of a practice or behavioral change. Social, economic, or environmental outcomes were provided or estimated for one or more measures. |
| **Needs Improvement** | **Good** | **Excellent** |
| Comments: | | |
| Lacks supporting data and success stories to adequately show programmatic outcomes. | Provided data including graphs and tables where appropriate and included a sample of success stories to show programmatic outcomes. | Data provides strong support of program impact and adds to the readability of the narrative. |
| **Needs Improvement** | **Good** | **Excellent** |
| Comments: | | |
| No evidence the program is valuable to the community or meets an identified need. | Described the public value the Extension program provides to the community. | Describes the broader public value in terms of impact on the overall wellbeing/welfare of the community/state. |
| **Needs Improvement** | **Good** | **Excellent** |
| Comments: | | |

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| **Marketing & Outreach** | | |
| No evidence of effectively using appropriate communications tools to market programs or impacts. | Utilized effective strategies to market educational programs, enhance Extension’s brand recognition and public image, and communicate value and impact of programs. | Used varied communications tools and strategies tailored to difference audiences to reach all potential participants and expand program reach. |
| **Needs Improvement** | **Good** | **Excellent** |
| Comments: | | |
| No evidence of effectively promoting programs and engaging a diverse group of participants from the target population. | Provided targeted outreach to new or underserved audiences. Intentionally marketed the ability to accommodate the needs of people with disabilities and LEP individuals. | Evidence of engaging new audiences as a result of innovative marketing efforts. |
| **Needs Improvement** | **Good** | **Excellent** |
| Comments: | | |

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| **Other** | |
| Professional development activities to increase knowledge and effectiveness. | **Needs Improvement  Good  Excellent** |
| Teamwork and/or involvement in professional associations or leadership roles. | **Needs Improvement  Good  Excellent** |
| Honors and awards received. | **Needs Improvement  Good  Excellent** |
| Comments: | |

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| **Overall Comments and/or Areas for Improvement:** |
| Comments: |

**Recommend to promote: Yes**  **No**

**Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**