

## EMCC Dual Enrollment Instructor Evaluation Time Recording Sheet

Fill in areas as appropriate	
<b>*Rate: \$115/evaluation</b>	
<b>Date of Evaluation</b>	
<b>Course Evaluated</b>	
<b>Instructor of Course</b>	
<b>Location (EMC or HS name)</b>	
<b>Name of Evaluator</b>	

Division Chair Signature: _____	Date: _____
Dean Signature: _____	Date: _____
VP Signature: _____	Date: _____
HR Signature: _____	Date: _____

<b>FOR EMC HR USE ONLY</b>	
EMPLID: _____	DOC#: _____
Date: _____	HR Representative: _____