

**LSUHSC SCHOOL OF MEDICINE - NEW ORLEANS  
ANNUAL REVIEW FORM  
DEPARTMENT HEAD, CENTER or PROGRAM DIRECTOR, DEAN'S OFFICE**

Appointment (Hire) Date \_\_\_\_\_  
Date of Review Meeting \_\_\_\_\_  
(An updated CV is to be on file in the departmental office)  
(One or more ACTIVITIES WORKSHEETS may be appended)

NAME \_\_\_\_\_

ACADEMIC DEPARTMENT \_\_\_\_\_

TITLE/RANK \_\_\_\_\_

YEARS IN ADMINISTRATIVE POSITION \_\_\_\_\_

**% EFFORT DISTRIBUTION:**

Teaching: \_\_\_\_\_

Research: \_\_\_\_\_

Service: \_\_\_\_\_

a) Clinical: \_\_\_\_\_

b) Administrative: \_\_\_\_\_

c) Other: \_\_\_\_\_

**# FACULTY SUPERVISED:**

Full-time: \_\_\_\_\_

Part-time: \_\_\_\_\_

Gratis: \_\_\_\_\_

**% EFFORT DISTRIBUTION of SUPERVISED FACULTY COLLECTIVELY:**

Teaching: \_\_\_\_\_

Research: \_\_\_\_\_

Service: \_\_\_\_\_

a) Clinical: \_\_\_\_\_

b) Administrative: \_\_\_\_\_

c) Other: \_\_\_\_\_

(NA = not applicable)

**Self-Assessment on Administrative Skills (Strengths and Weaknesses)**

(If applicable, outline specific organizational features that facilitated or hindered progress toward goals and overall performance)  
(Management, communication, faculty and staff evaluation, executive and financial judgment, delegation of authority, etc)

Objectives Prior Year	Progress Made

**Major Accomplishments for Academic Year**

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**Self-Assessment on Prior Goals**

Objectives Prior Year	Progress Made

**Specific Goals for Next Academic Year**

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**Long Range Professional and Career Goals**

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