

### **Peer Evaluation Completion Affidavit**

Faculty member requesting peer evaluation Dr. Chris Lacher

Date of pre-evaluation conference 02/04/10

Date of classroom evaluation 02/18/10

Class evaluated COP 4530, Data Structures

Date of post-evaluation conference 03/23/10

Date of written report 03/22/10

Name of observer Mr. Michael Barbour

Signature of observer \_\_\_\_\_

#### **Please read this statement and sign and date below:**

I completed having a peer evaluate one of my courses as a part of the annual evaluation process.

Name \_\_\_\_\_ Date \_\_\_\_\_