

Applicant Interview Evaluation Form for Finalists

Below is an example of a template that can be modified to fit the department's needs.

**SOUTHERN METHODIST UNIVERSITY
APPLICANT INTERVIEW EVALUATION FORM**

Applicant's Name _____ Date _____

Position _____ School _____ Department/Division _____

Interviewer: _____ Check: Faculty Staff Student Community Member

QUALIFICATIONS

| POSITION REQUIREMENTS | STRONG | ACCEPTABLE | WEAK | NOT OBSERVED | COMMENTS |
|-----------------------|--------|------------|------|--------------|----------|
| TEACHING | | | | | |

CREATIVE,
ACTIVITIES or
SCHOLARSHIP

| | | | | | |
|----------------------|--|--|--|--|--|
| | | | | | |
| INTERPERSONAL SKILLS | | | | | |

OVERALL RATING FOR THIS POSITION

| | | |
|-------------|-----------------|-----------|
| 1 STRONG | 2 ACCEPTABLE | 3 WEAK |
|-------------|-----------------|-----------|

INSTRUCTIONS

- 1) Complete the Applicant Interview Evaluation Form and sign it.
- 2) DO NOT comment on applicant's age, race, sex, disability, national origin, religion, sexual orientation, and marital or family status.
- 3) Please submit all evaluation forms and resumes to the Search Committee Chair.