



# Instructor Report Form

Use for documenting communication with an instructor during a year that no site visit is required or for communication between site visits, as necessary.

## FACULTY LIAISON INFORMATION

Name of VU Faculty Liaison:

Date of Communication:

Start Time:

End Time:

Method of Communication: Phone Conference

Video Conference (i.e. Skype)

Other (please explain):

## HIGH SCHOOL - CAREER/TECHNICAL CENTER INFORMATION

Name(s) of Project EXCEL Instructor:

Name(s) of High School or Career/Technical Center:

VU Project EXCEL Course Number(s):

## Topics Discussed

Provide a description of the communication session, including all discussion items:

Sample student work was submitted prior to the scheduled conference as requested. Yes No

Is the depth and rigor of the dual credit course equivalent to the on-campus course? Are the instructor's grading methods consistent with the on-campus course?

Additional comments/concerns regarding this session and/or instructor:

*\*A typed name below serves as an electronic signature when this report is sent from a VU email address.*

\*Faculty Liaison Signature: \_\_\_\_\_

Date: \_\_\_\_\_

*Note: A copy of this form must also be sent to the division dean.*