|  |  |
| --- | --- |
|  | Tracy Unified School District |

**Evaluation Notification Conference**

|  |  |
| --- | --- |
| **Teacher Name:** *click here to enter name* | **Probationary** [ ] **Permanent** [ ] **5 Year Cycle** [ ]  **Year:**Click here to enter text. |
| **Grade:** *Choose an item.* |
| **Subject:** *Click here to enter text.* |
| **Evaluator***: Click here to enter text.* |

**The following documents shall be provided during the Conference:**

[ ] Evaluation Procedures

[ ] Evaluation Standards [ ] Evaluation Rubric

[ ]  Links to District Applicable Benchmarks

 <https://auth.illuminateed.com/#/0afdad7e-1b4b-48d2-b728-8e492a5be84c>

[ ]  Access to Applicable State Frameworks <https://www.cde.ca.gov/ci/cr/cf/allfwks.asp>

*The Teacher is responsible to identify, develop and write acceptable performance objectives*

|  |
| --- |
| ***Observation Schedule*** |
|  | **Subject/****Course to be observed** | **Date** | **Time/Period** | **Location** |
| **First Interim Evaluation** |
| **Pre-Conference**  |  |  |  |  |
| **Classroom Observation** |  |  |  |
| **Post-Observation Conference** |  |  |  |
| **Second Interim Evaluation** |
| **Pre-Conference**  |  |  |  |  |
| **Classroom Observation** |  |  |  |
| **Post-Observation Conference** |  |  |  |
|  |  | **Date** | **Time/Period** | **Location** |
| **Final Evaluation Meeting**  | (Approximately March-May) |  |  |  |