

#### **OXNARD SCHOOL DISTRICT**

STANDARD 6 PLAN FOR DEVELOPING

**AS A PROFESSIONAL EDUCATOR-**

***End of Year Summary***

 NAME POSITION SCHOOL GRADE/SUBJECT

**1) On which areas did you focus your professional learning for this school year?**

**2) How did your focused professional learning goals impact your work as a professional educator this school year?**

**3) How will you leverage your professional learning goals to continue to grow as a professional educator in the future?**

**4) Is there any additional information or materials you need at this point to continue your professional growth?**

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 (Site Evaluator’s Signature) (Teacher’s Signature)

Date: Date: