

CLASSIFIED EMPLOYEE

Paraeducator Evaluation

NAME: _____ SCHOOL: _____

DATE: _____ Evaluation Period: 3 month 5 month 2 year

NOTE: Absence of rating indicates "Not Applicable"

	<i>Exceeds Standards</i>	<i>Meets Standards</i>	<i>Needs Improvement</i>	<i>Not Satisfactory</i>
A. Interpersonal Relationships				
1. Paraeducator demonstrates rapport with students.	1	2	3	4
2. Paraeducator is supportive of students in comments and actions.	1	2	3	4
3. Mutual respect and open communication are evident between paraeducator and staff.	1	2	3	4
4. Paraeducator respects confidentiality of school and student information.	1	2	3	4

Comments: (optional) _____

B. Organization for Instruction

1. Instructional activities are preplanned and materials are ready when students arrive.	1	2	3	4
2. Instructions to students are clear and uncomplicated.	1	2	3	4
3. Tasks are appropriate to students' diagnosed needs.	1	2	3	4

Comments (optional) _____

C. Motivation for Learning

1. Tasks are varied and presented with enthusiasm.	1	2	3	4
2. Cheerful, interesting learning environment is provided.	1	2	3	4
3. Students are encouraged and reinforced in a positive way.	1	2	3	4

Comments (optional) _____

D. Discipline	<i>Exceeds Standards</i>	<i>Meets Standards</i>	<i>Needs Improvement</i>	<i>Not Satisfactory</i>
1. Paraeducator is alert to potential problems with emphasis on prevention.	1	2	3	4
2. Paraeducator does not allow misbehavior to disrupt instruction; is firm but friendly.	1	2	3	4
3. Students are relaxed but exhibit self-control and respect for paraeducator and peers.	1	2	3	4
Comments (optional) _____				

E. Performance				
1. Paraeducator is well-groomed.	1	2	3	4
2. Demonstrates reliability in attendance and observance of work schedule.	1	2	3	4
3. Paraeducator accepts direction.	1	2	3	4
4. Demonstrates familiarity with and support for program guidelines and materials.	1	2	3	4
Comments (optional) _____				

F. Recommendations: _____

SUMMARY EVALUATION - Check overall performance

- Not Satisfactory Requires Improvement Effective Meets Standards Exceeds Standards

RATER/EVALUATOR:

- I DO DO NOT RECOMMEND PERMANENT STATUS.

Signature _____ Title _____ Date _____

EMPLOYEE: I certify that this report has been discussed with me.

- I wish to I do not wish to appeal this evaluation according to procedure.

Comments: _____

Signature _____ Date _____