

Professional Practice Summary Page

Educator's Name: _____ School Year: _____

School: _____ Evaluator: _____

RATINGS ON INDIVIDUAL RUBRICS:

I. Planning and Preparation for Learning

Highly Effective Effective Improvement Needed Does Not Meet Standards

II. Knowledge of Students

Highly Effective Effective Improvement Needed Does Not Meet Standards

III. Delivery of Instruction

Highly Effective Effective Improvement Needed Does Not Meet Standards

IV. Monitoring, Assessment and Follow-Up

Highly Effective Effective Improvement Needed Does Not Meet Standards

V. Family and Community Outreach

Highly Effective Effective Improvement Needed Does Not Meet Standards

VI. Professional Responsibilities

Highly Effective Effective Improvement Needed Does Not Meet Standards

Circle Overall Rubric Rating:

Highly Effective (4) **Effective (3)** **Improvement Needed (2)** **Does Not Meet Standards (1)**

Professional practice overall rating: _____ (1-4)

Student Growth:

Student Growth Discussion reflected in educator e-portfolio: Yes No

Goal Setting will include student growth component: Required Optional

OVERALL COMMENTS BY EVALUATOR:

OVERALL COMMENTS BY EDUCATOR:

Evaluator's Signature: _____ Date: _____

Educator's Signature: _____ Date: _____

(The educator's signature indicates that they have seen and discussed the evaluation; it does not necessarily denote agreement with the report.)