

Webster Groves School District Individual Professional Development Plan

Teacher(s) Signature(s) _____
Building: _____ Date: _____ Principal's Signature: _____

<i>District Goal</i>
<i>Question/Objective: What is desired?</i>
<i>Action Plan: What are the steps and/or activities for achieving the objective and what is the calendar for completion?</i>
<i>Assessment: What methods will you use to measure results?</i>
<i>Results of Actions: What was the impact on student achievement?</i>
<i>Reflections: What are your thoughts about this experience?</i>