# McCreary County School District




## *Certified Evaluation Plan*

## *2025 - 2026*

## CERTIFIED SCHOOL PERSONNEL EVALUATION PLAN

**The McCreary County School District hereby assures the Commissioner of Education that:**

**This evaluation plan was developed by an evaluation committee composed of an equal number of teachers and administrators.**

**The evaluation process and criteria will be explained to and discussed with all certified personnel annually within one month after the district's opening day (or within thirty days of employment). This shall occur prior to the implementation of the plan. The evaluation of each certified staff member will be conducted or supervised by the employee's immediate supervisor.**

**All certified employees shall develop an Individual Professional Growth Plan aligned with the school/district improvement plan and comply with the requirements of 704 KAR 3:370. The PGP will be reviewed annually.**

**All administrators, including the superintendent and non-tenured teachers, will be evaluated annually.**

**All tenured teachers will be part of a three-year evaluation cycle, with each teacher receiving one observation annually. The cycle consists of a formative observation in the first year and a formative observation in the second year, and it culminates with a summative evaluation in the third year.**

**Each evaluator will be trained and approved to use appropriate evaluation techniques and local instruments and procedures.**

**Each person evaluated will have both formative and summative evaluations with the evaluator regarding his/her performance.**

**Each evaluatee shall be given a copy of his/her summative evaluation, which shall be filed with the official personnel records.**

**McCreary County School District has adopted Vector Solutions, an online evaluation platform. This platform encompasses all aspects outlined in the certified evaluation plan in digital format. Please not that while the format might appear different, all essential components remain intact.**

**The local evaluation plan provides for the right to a hearing as to every appeal, an opportunity to review all documents presented to the evaluation appeals panel, and a right to presence of evaluatee's chosen representative.**

**The evaluation plan process will not discriminate on the basis of race, national origin, religion, marital status, sex, or disability.**

**This evaluation plan will be reviewed as needed and any substantive revisions will be submitted to the Department of Education for approval.**

**The local board of education approved the evaluation plan as recorded in the minutes of the meeting held:**

Clint E Daugh — 5/27/25

**Signature of District Superintendent** — **Date**

John Bmff — 5-22-25

**Signature of Chairperson, Board of Education** — **Date**

| 50 / 50 Committee (Sasha Taylor – District Contact) | |
|---|---|
| Charlotte Barnett, Principal | Tony Smith, Teacher |
| Dr. Cindy Moore, Principal | Teresa Kidd, Teacher |
| Dr. Angela Loudermilk, Principal | JoJo Stephens, Teacher |
| Kathy Neal, Principal | Heather Watters, Teacher |
| Dr. Sam Marple, Principal | Jason Strunk, Teacher |

# Table of Contents


| Title | Page(s) |
|---|---|
| Overview of the CEP | 4 |
| Key Points of the CEP | 5 |
| Teachers | 7 |
| Principals / Asst. Principals | 15 |
| Other Professionals | 24 |
| District Certified Personnel | 66 |
| Appeals Procedures | 75 |


## OVERVIEW of the CEP

The McCreary County Certified Evaluation Plan (CEP) has been developed with the guidance of 704 KAR 3:370, regulation 156.557, and the Working on the Work (WOW) document supplied by the Kentucky Department of Education. The following timetable will be used for the evaluation process for all certified employees under the position of the Superintendent.

| Personnel | Frequency | Dates |
|---|---|---|
| Non-tenured | Evaluated annually | **October 15** (or within 30 days after hire date) PGP / 30-60-90 Plan developed and approved<br><br>**April 15**<br>Minimum of two (2) formative observations completed<br>Pre and Post Conferences Required<br><br>**May 1**<br>Summative evaluation completed |
| Tenured | Evaluated a minimum of once every year | **Year 1**<br>**October 15:** PGP / 30-60-90 Plan developed and approved<br>**April 15:** Formative observation completed<br><br>**Year 2**<br>**October 15:** PGP / 30-60-90 Plan reviewed and updated<br>**April 15:** Formative observation completed<br><br>**Year 3**<br>**October 15:** PGP / 30-60-90 Plan reviewed and updated<br>**May 1:** Summative evaluation completed |
| Administrators | Evaluated annually | **October 15** (or within 30 days after hire date)<br>PGP / 30-60-90 Plan developed and approved<br><br>**April 15**<br>Minimum of one formative evaluation<br>Minimum of one site visit (1hr)<br><br>**May 1**<br>Summative evaluation completed |

## KEY POINTS of the CEP

- All certified employees beneath the position of the Superintendent will be evaluated in the following four performance measures: **Planning, Environment, Instruction,** and **Professionalism**. Evaluators will assign one of the following ratings to each performance measure: ***Ineffective, Developing, Accomplished,*** and ***Exemplary.*** Each rating will be based on evidence supplied by the evaluatee and the professional judgement of the evaluator. The rating within each of the four performance measures will ultimately lead to a *single summative rating* based on the district's decision rules. **Note:** The performance criteria for each role group is identified later in the CEP.

- In order to arrive at the summative rating, the following decision rules will be used:

| SUMMATIVE RATING DECISION RULES | |
|---|---|
| **IF....** | **THEN...** |
| The ENVIRONMENT MEASURE and INSTRUCTION MEASURE are rated INEFFECTIVE | The summative rating shall be INEFFECTIVE |
| The ENVIRONMENT MEASURE or INSTRUCTION MEASURE are rated INEFFECTIVE | The summative rating shall be DEVELOPING or INEFFECTIVE |
| The PLANNING MEASURE or the PROFESSIONALISM MEASURE is rated INEFFECTIVE | The summative rating shall not be EXEMPLARY. |
| Two measures are rated DEVELOPING and two measures are rated ACCOMPLISHED | The summative rating shall be ACCOMPLISHED |
| Two measures are rated ACCOMPLISHED and two measures are rated EXEMPLARY | The summative rating shall be EXEMPLARY |

- All evaluators must meet CEP requirements including the initial 2-day training conducted by KDE prior to beginning the evaluation process. Evaluators who have already completed the initial 2-day training will complete the district-approved 6-hour update training. This 6-hour training will be approved by KDE for EILA credit. Evaluators will be required to complete a district-approved, specific observation training prior to conducting observations. This training will be offered annually in July prior to school beginning, and on an "as needed basis" during the year.
- The primary evaluator will be the immediate supervisor. The immediate supervisor will also assist in the development of the professional growth plan.
- Summative evaluations of certified personnel shall be documented in writing (on district-approved forms) and be included in the official personnel record documentation of the summative evaluation. All evidences used to determine an overall performance rating must be included in the documentation of the summative evaluation. District Administrator summative evaluations, principal evaluations, and all other summative evaluations will be placed in the

personnel file at central office. The evaluation matrix for each school will list all certified employees, the cycle year, the assigned administrator, and the formative and summative observation dates. The electronic evaluation matrix will be sent to central office to be housed in a google folder.

- All certified employees will receive training regarding this CEP within 30 calendar days after having reported to work for the 2023-2024 school year.

- All certified employees are provided the opportunity to submit a written statement in response to the summative rating, which will be included in their personnel folder.

- All evaluators must meet CEP requirements prior to conducting a formative or summative evaluation.

## TEACHERS

- Non-tenured teachers will be evaluated annually and tenured teachers will be evaluated a minimum of once every three years according to the timetable listed on page 4.
- Observations will be formative in nature and scheduled prior to the observation date. There will be two (2) observations and each will consist of 30-60 minutes, depending on the school's master schedule.
- A post-observation conference is required within ten (10) working days of the observation. Both the observation, the post-conference observation, and all monitoring are openly conducted with full knowledge of the evaluatee.
- The performance criteria used to evaluate teachers will be the Kentucky Framework for Teaching. The table below identifies each domain within the Kentucky Framework for Teaching and the specific performance measure with which it is most closely associated.

| | **Performance Measures** | | | |
|---|---|---|---|---|
| Performance Criteria | Planning | Environment | Instruction | Professionalism |
| Kentucky Framework for Teaching | *Domain 1* Planning and Preparation | *Domain 2* Classroom Environment | *Domain 3* Instruction | *Domain 4* Professional Responsibilities |

- Per requirements, the evaluation process will feature both required and optional evidences to help determine performance ratings within each performance measure and ultimately the summative rating. The table below identifies both types of evidences.

| **Evidence** | **Required / Optional** | **Documentation Process** |
|---|---|---|
| Formative Observations | Required Evidence | Item will kept on district-approved forms with the evaluator |
| PGP | Required Evidence | Item will kept on district-approved forms with the evaluator |
| Lesson Plans | Optional Evidence | Item will be kept with evaluatee |
| Parent Communication Logs | Optional Evidence | Item will be kept with evaluatee |
| Student Growth Data | Optional Evidence | Item will be kept with evaluatee |
| Participation in PLCs | Optional Evidence | Item will be kept with evaluatee |
| Video Lessons | Optional Evidence | Item will be kept with evaluatee |
| Teacher Attendance / Duty | Optional Evidence | Item will be kept with evaluatee |
| Timely Grade Entry | Optional Evidence | Item will be kept with evaluatee |
| Professional Development | Optional Evidence | Item will be kept with evaluatee |

| | | |
|---|---|---|
| Chalk Curr. Framework | Optional Evidence | Item will available to evaluate & evaluator |
| Formative and Summative Assessment Development | Optional Evidence | Item will be kept by evaluatee & evaluator |
| Readiness Benchmark Assessment Development | Optional Evidence | Item will be kept by evaluatee & evaluator |
| Student Recog. / Incentives | Optional Evidence | Item will be kept with evaluatee |
| Student Survey | Optional Evidence | Item will be kept with evaluatee |
| Behavior Referrals | Optional Evidence | Item will be kept by evaluatee & evaluator |
| Use of Google Classroom | Optional Evidence | Item will be kept by evaluatee & evaluator |
| Support Strategies | Optional Evidence | Item will be kept with evaluatee |
| Homebound | Optional Evidence | Item will be kept with evaluatee |
| Extension | Optional Evidence | Item will be kept with evaluatee |
| NTI Work and Reporting | Optional Evidence | Item will be kept with evaluatee |
| Extra-Curricular Event Assignments | Optional Evidence | Item will be kept by evaluatee & evaluator |
| SBDM Meeting Participation | Optional Evidence | Item will be kept by evaluatee & evaluator |
| Supervision Duties | Optional Evidence | Item will be kept by evaluatee & evaluator |
| Completion of Self-Reflection | Optional Evidence | Item will be kept by evaluatee & evaluator |

- The following table indicates the specific evidence that supports each of the performance measures.

| Planning | Environment | Instruction | Professionalism |
|---|---|---|---|
| Formal Observations<br>PGP<br>Lesson Plans<br>Participation in PLCs<br>Posting Grades<br>Chalk Curr. Framework<br><br>Form / Summ.<br>Assessment Dev.<br><br>Readiness Benchmark<br>Assessment Development | Formal Observations<br>PGP<br>Parent Comm. Logs<br><br>Student Recognition<br>Incentives<br><br>Student Surveys<br>Behavior Referrals | Formal Observations<br>PGP<br>Student Growth Data<br>Timely Grade Entry<br>Use of Google Classroom<br>Support Strategies<br>Homebound<br>Video Lesson<br>Extension<br>NTI Work and Reporting | Formal Observations<br>PGP<br>Participation in PLCs<br>Teacher Attend. / Duty<br>Professional Development<br><br>Extra-Curricular Event<br>Assignments<br><br>SBDM Meeting<br>Participation<br><br>Completion of<br>Self-Reflection |

# Teacher Professional Growth Plan (Self-Evaluation) REQUIRED EVIDENCE

| **Teacher Name:** | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| **1. Self-Assessment of Performance** | | | | | | | | |
| **Rating Scale to be used: (I) Ineffective, (D) Developing, (A) Accomplished, (E) Exemplary** | **DATE:** | | | | | | **DATE:** | |
| **DOMAIN 1** Planning and Preparation | | | | | | | | |
| 1A – Demonstrating Knowledge of Content and Pedagogy | | | | | | | | |
| 1B – Demonstrating Knowledge of Students | | | | | | | | |
| 1C – Selecting Instructional Outcomes | | | | | | | | |
| 1D – Demonstrating Knowledge of Resources | | | | | | | | |
| 1E – Designing Coherent Instruction | | | | | | | | |
| 1F – Designing Student Assessment | | | | | | | | |
| **DOMAIN 2** Classroom Environment | | | | | | | | |
| 2A – Creating an Environment of Respect and Rapport | | | | | | | | |
| 2B – Establishing a Culture of Learning | | | | | | | | |
| 2C – Managing Classroom Procedures | | | | | | | | |
| 2D – Managing Student Behavior | | | | | | | | |
| 2E – Organizing Physical Space | | | | | | | | |
| **DOMAIN 3** Instruction | | | | | | | | |
| 3A – Communicating with Students | | | | | | | | |
| 3B – Using Questioning and Discussion Techniques | | | | | | | | |
| 3C – Engaging Students in Learning | | | | | | | | |
| 3D – Using Assessment in Instruction | | | | | | | | |
| 3E – Demonstrating Flexibility and Responsiveness | | | | | | | | |
| **DOMAIN 4** Professional Responsibilities | | | | | | | | |
| 4A – Reflecting on Teaching | | | | | | | | |
| 4B – Maintaining Accurate Records | | | | | | | | |
| 4C – Communicating with Families | | | | | | | | |
| 4D – Participating in a Professional Community | | | | | | | | |
| 4E – Growing and Developing Professionally | | | | | | | | |
| 4F – Demonstrating Professionalism | | | | | | | | |

## Professional Growth Plan (including 30-60-90 Plan) REQUIRED EVIDENCE

**Name:**

**a. Professional Growth Goal(s) based on Self-Reflection form:**

## 30-60-90 Plan for Reaching Goals

| b. Professional Learning Activities | c. Needed Resources/Support | d. Anticipated Completion Date |
|---|---|---|
| | | *First 30 Instructional Days* |
| | | *Next 60 Instructional Days* |
| | | *Last 90 Instructional Days* |

**e. How will you assess your progress/success in addressing the Professional Growth Goal?**

**f. What is the expected impact on student learning of your professional learning activities?**

***INITIAL*** **REVIEW of PGP**

**Evaluatee Signature:** _____ **Date:** _____

**Evaluator Signature:** _____ **Date:** _____

***FINAL*** **REVIEW of PGP**

**Evaluatee Signature:** _____ **Date:** _____

**Evaluator Signature:** _____ **Date:** _____

## Formative Observation Notes

Teacher Name:_____ Date: _____

| DOMAIN | NOTES |
|---|---|
| 2A – Creating an Environment of Respect & Rapport | |
| 2B – Establishing a Culture for Learning | |
| 2C – Managing Classroom Procedures | |
| 2D – Managing Student Behavior | |
| 2E – Organizing Physical Space | |
| 3A – Communicating with Students | |
| 3B – Using Questioning & Discussion Techniques | |
| 3C – Engaging Students in Learning | |
| 3D – Using Assessments in Instruction | |
| 3E – Demonstrating Flexibility & Responsiveness | |

## Formative Evaluation Summary Form REQUIRED EVIDENCE

| | | | |
|---|---|---|---|
| **Evaluatee:** | | **Evaluator:** | |
| **Grade Level:** | | **School:** | |
| **Content Area:** | | **Eval. Position:** | |
| **Date of Observation:** | | **Time:** | |

**Directions:** The evaluator will refer to the rubric found within the Kentucky Framework for Teaching when deciding on performance ratings.

| **ENVIRONMENT** | I | D | A | E |
|---|---|---|---|---|
| **2A – Creating an Environment of Respect & Rapport** | | | | |
| **2B – Establishing a Culture for Learning** | | | | |
| **2C – Managing Classroom Procedures** | | | | |
| **2D – Managing Student Behavior** | | | | |
| **2E – Organizing Physical Space** | | | | |
| ***OVERALL PERFORMANCE MEASURE RATING for PLANNING*** | | | | |
| **INSTRUCTION** | I | D | A | E |
| **3A – Communicating with Students** | | | | |
| **3B – Using Questioning & Discussion Techniques** | | | | |
| **3C – Engaging Students in Learning** | | | | |
| **3D – Using Assessments in Instruction** | | | | |
| **3E – Demonstrating Flexibility & Responsiveness** | | | | |
| ***OVERALL PERFORMANCE MEASURE RATING for ENVIRONMENT*** | | | | |

**Evaluatee's Signature:**_____ **Date:**_____

**Evaluator's Signature:**_____ **Date:**_____

**Feedback / Comments:**

## SUMMATIVE EVALUATION

Name of Evaluatee: _____ Date: _____

| PERFORMANCE MEASURE | PERFORMANCE CRITERIA | EVIDENCES | Rating: Select 1 rating based on evidences and professional judgment |
|---|---|---|---|
| Planning | Ky. Framework for Teaching<br><br>Planning and Preparation | Lesson Plans<br><br>Participation in PLCs<br><br>Posting Grades | Ineffective _____<br>Developing _____<br>Accomplished _____<br>Exemplary _____ |
| Environment | Ky. Framework for Teaching<br><br>Classroom Environment | Formative Observations<br><br>PLCs<br><br>Communication Logs | Ineffective _____<br>Developing _____<br>Accomplished _____<br>Exemplary _____ |
| Instruction | Ky. Framework for Teaching<br><br>Instruction | Formal Observations<br><br>Student Growth Data<br><br>Posting Grades | Ineffective _____<br>Developing _____<br>Accomplished _____<br>Exemplary _____ |
| Professionalism | Ky. Framework for Teaching<br><br>Professionalism | PGP<br><br>Participation in PLCs<br><br>Teacher Att. / Duty | Ineffective _____<br>Developing _____<br>Accomplished _____<br>Exemplary _____ |

| SUMMATIVE RATING DECISION RULES | |
|---|---|
| **IF....** | **THEN...** |
| The ENVIRONMENT MEASURE and INSTRUCTION MEASURE are rated INEFFECTIVE | The summative rating shall be INEFFECTIVE |
| The ENVIRONMENT MEASURE or INSTRUCTION MEASURE are rated INEFFECTIVE | The summative rating shall be DEVELOPING or INEFFECTIVE |
| The PLANNING MEASURE or the PROFESSIONALISM MEASURE is rated INEFFECTIVE | The summative rating shall not be EXEMPLARY. |
| Two measures are rated DEVELOPING and two measures are rated ACCOMPLISHED | The summative rating shall be ACCOMPLISHED |
| Two measures are rated ACCOMPLISHED and two measures are rated EXEMPLARY | The summative rating shall be EXEMPLARY |

Summative Rating: _____

| **Feedback / Comments:** |
|---|
| |

Evaluatee Signature: _____ Date: _____

Evaluator Signature: _____ Date: _____

## PRINCIPALS / ASSISTANT PRINCIPALS

- Administrators will be evaluated annually according to the timetable listed on page 4.
- Formative Observations will be scheduled prior to the observation date and will consist of a one (1) hour visit.
- A post-observation conference is required within ten (10) working days of the observation. Both the observation, the post-conference observation, and all monitoring are openly conducted with full knowledge of the evaluatee.
- The performance criteria used to evaluate principals and assistant principals will be the Professional Standards for Educational Leaders (PSEL). The table below identifies each standard and the specific performance measure with which it is most closely associated.

| | **Performance Measures** | | | |
|---|---|---|---|---|
| Performance Criteria | Planning | Environment | Instruction | Professionalism |
| PSEL Standards | ***Standard 1*** *Mission, Vision, and Core Values*<br><br>***Standard 9*** *Operations and Management*<br><br>***Standard 10*** *School Improvement* | ***Standard 3*** *Equity and Cultural Responsiveness*<br><br>***Standard 7*** *Professional Community for Teachers and Staff* | ***Standard 4*** *Curriculum, Instruction and Assessment*<br><br>***Standard 5*** *Community of Care and Support for Students*<br><br>***Standard 6*** *Professional Capacity of School Personnel* | ***Standard 2*** *Ethics and Professional Norms*<br><br>***Standard 8*** *Meaningful Engagement of Families and Community* |

- Per requirements, the evaluation process will feature both required and optional evidences to help determine performance ratings within each performance measure and ultimately the summative rating. The table below identifies both types of evidences.

| **Evidence** | **Required / Optional** | **Documentation Process** |
|---|---|---|
| Formative Observations | Required Evidence | Item will kept on district-approved forms with the evaluator |

| | | |
|---|---|---|
| PGP | Required Evidence | Item will kept on district-approved forms with the evaluator |
| Faculty Meeting Agenda / Minutes | Optional Evidence | Item will be kept with evaluatee |
| Dept./Grade Level Agenda / Minutes | Optional Evidence | Item will be kept with evaluatee |
| PLCs Agenda / Minutes | Optional Evidence | Item will be kept with evaluatee |
| Budgets | Optional Evidence | Item will be kept with evaluatee |
| Walk-Throughs | Optional Evidence | Item will be kept with evaluatee |
| EILA | Optional Evidence | Item will be kept with evaluatee |
| Parent / Community Engagement | Optional Evidence | Item will be kept with evaluatee |
| Master Schedule | Optional Evidence | Item will be kept with evaluatee |
| Student Performance Data | Optional Evidence | Item will be kept with evaluatee |
| SBDM Agenda / Minutes | Optional Evidence | Item will be kept with evaluatee |

- The following table indicates the specific evidence that supports each of the performance measures.

| **Planning** | **Environment** | **Instruction** | **Professionalism** |
|---|---|---|---|
| Formative Observation<br><br>PGP<br><br>Master Schedule<br><br>Budget<br><br>PLCs Agenda / Minutes<br><br>Depart./ Grade Level Agenda / Minutes | Formative Observation<br><br>PGP<br><br>Parent / Community Engagement<br><br>PLCs Agenda / Minutes<br><br>Depart./ Grade Level Agenda / Minutes | Formative Observation<br><br>PGP<br><br>Student Performance Data<br><br>Walk through<br><br>Depart./ Grade Level Agenda / Minutes | Formative Observation<br><br>PGP<br><br>EILA<br><br>PLCs Agenda / Minutes |

| | | | |
|---|---|---|---|
| Faculty Agenda / Minutes<br><br>SBDM Agenda / Minutes | Faculty Agenda / Minutes | Faculty Agenda / Minutes | |

## Principal / Asst. Principal Professional Growth Plan (Self-Evaluation)

**REQUIRED EVIDENCE**

**Name:** _____ **Date:** _____

| Performance Measure | Beginning Score | Ending Score (Completed prior to Summative Evaluation Conference ) |
|---|---|---|
| **Planning**<br>Standard 1: Mission, Vision, and Core Values<br>Standard 9: Operations and Management<br>Standard 10: School Improvement | I D A E | I D A E |
| **Environment**<br>Standard 3: Equity and Cultural Responsiveness<br>Standard 7: Professional Community for Teachers and Staff | I D A E | I D A E |
| **Instruction**<br>Standard 4: Curriculum, Instruction and Assessment<br>Standard 5: Community of Care and Support for Students<br>Standard 6: Professional Capacity of School Personnel | I D A E | I D A E |
| **Professionalism**<br>Standard 2: Ethics and Professional Norms<br>Standard 8: Meaningful Engagement of Families and Community | I D A E | I D A E |

## Professional Growth Plan (including 30-60-90 Plan) REQUIRED EVIDENCE

| Name: | | |
|---|---|---|
| a. Professional Growth Goal(s) based on Self-Reflection form: | | |
| **30-60-90 Plan for Reaching Goals** | | |
| **b. Professional Learning Activities** | **c. Needed Resources/Support** | **d. Anticipated Completion Date** |
| | | *First 30 Instructional Days* |
| | | *Next 60 Instructional Days* |
| | | *Last 90 Instructional Days* |
| e. How will you assess your progress/success in addressing the Professional Growth Goal? | | |
| f. What is the expected impact on student learning of your professional learning activities? | | |

***INITIAL*** **REVIEW of PGP**

**Evaluatee Signature:** _____ **Date:** _____

**Evaluator Signature:** _____ **Date:** _____

***FINAL*** **REVIEW of PGP**

**Evaluatee Signature:** _____ **Date:** _____

**Evaluator Signature:** _____ **Date:** _____

**Formative Observations Notes**

Principal Name: _____ Date: _____

| PLANNING |
|---|
| ***Standard 1*** *Mission, Vision, and Core Values* ***Standard 9*** *Operations and Management* ***Standard 10*** *School Improvement* |
| **NOTES:** |

| ENVIRONMENT |
|---|
| ***Standard 3*** *Equity and Cultural Responsiveness* ***Standard 7*** *Professional Community for Teachers and Staff* |
| **NOTES:** |

| INSTRUCTION |
|---|
| ***Standard 4*** *Curriculum, Instruction and Assessment* ***Standard 5*** *Community of Care and Support for Students* ***Standard 6*** *Professional Capacity of School Personnel* |
| **NOTES:** |

| PROFESSIONALISM |
|---|
| ***Standard 2*** *Ethics and Professional Norms* ***Standard 8*** *Meaningful Engagement of Families and Community* |
| **NOTES:** |

**Formative Observation Summary REQUIRED**

| Performance Criteria | Performance Measure | Rating: Select 1 performance rating |
|---|---|---|
| PSEL Standards 1, 9, 10 | Planning | Ineffective ____<br>Developing ____<br>Accomplished ____<br>Exemplary ____ |
| **EVIDENCE USED / FEEDBACK:** | | |

| Performance Criteria | Performance Measure | Rating: Select 1 performance rating |
|---|---|---|
| PSEL Standards 3 & 7 | Environment | Ineffective ____<br>Developing ____<br>Accomplished ____<br>Exemplary ____ |
| **EVIDENCE USED / FEEDBACK:** | | |

| Performance Criteria | Performance Measure | Rating: Select 1 performance rating |
|---|---|---|
| PSEL Standards 4,5,6 | Instruction | Ineffective ____<br>Developing ____<br>Accomplished ____<br>Exemplary ____ |
| **EVIDENCE USED / FEEDBACK:** | | |

| Performance Criteria | Performance Measure | Rating: Select 1 performance rating |
|---|---|---|
| PSEL Standards 2, 8 | Professionalism | Ineffective ____<br>Developing ____<br>Accomplished ____<br>Exemplary ____ |
| **EVIDENCE USED / FEEDBACK:** | | |

Evaluatee Signature: _____ Date: _____

Evaluator Signature: _____ Date: _____

**Summative Evaluation REQUIRED**

| Performance Criteria | Performance Measure | Rating: Select 1 performance rating |
|---|---|---|
| PSEL Standards 1, 9, 10 | Planning | Ineffective ____<br>Developing ____<br>Accomplished ____<br>Exemplary ____ |
| **EVIDENCE USED / FEEDBACK:** | | |

| Performance Criteria | Performance Measure | Rating: Select 1 performance rating |
|---|---|---|
| PSEL Standards 3 & 7 | Environment | Ineffective ____<br>Developing ____<br>Accomplished ____<br>Exemplary ____ |
| **EVIDENCE USED / FEEDBACK:** | | |

| Performance Criteria | Performance Measure | Rating: Select 1 performance rating |
|---|---|---|
| PSEL Standards 4,5,6 | Instruction | Ineffective ____<br>Developing ____<br>Accomplished ____<br>Exemplary ____ |
| **EVIDENCE USED / FEEDBACK:** | | |

| Performance Criteria | Performance Measure | Rating: Select 1 performance rating |
|---|---|---|
| PSEL Standards 2, 8 | Professional | Ineffective ____<br>Developing ____<br>Accomplished ____<br>Exemplary ____ |
| **EVIDENCE USED / FEEDBACK:** | | |

| SUMMATIVE RATING DECISION RULES | |
|---|---|
| **IF....** | **THEN...** |
| The ENVIRONMENT MEASURE and INSTRUCTION MEASURE are rated INEFFECTIVE | The summative rating shall be INEFFECTIVE |
| The ENVIRONMENT MEASURE or INSTRUCTION MEASURE are rated INEFFECTIVE | The summative rating shall be DEVELOPING or INEFFECTIVE |
| The PLANNING MEASURE or the PROFESSIONALISM MEASURE is rated INEFFECTIVE | The summative rating shall not be EXEMPLARY. |
| Two measures are rated DEVELOPING and two measures are rated ACCOMPLISHED | The summative rating shall be ACCOMPLISHED |
| Two measures are rated ACCOMPLISHED and two measures are rated EXEMPLARY | The summative rating shall be EXEMPLARY |

Summative Rating: _____

| **Feedback / Comments:** |
|---|
| |

Evaluatee Signature: _____ Date: _____

Evaluator Signature: _____ Date: _____

**OTHER PROFESSIONALS:** Instructional Specialist, Speech Pathologist, Counselor, Media Specialist

- Non-tenured other professionals will be evaluated annually and tenured other professionals will be evaluated a minimum of once every three years according to the timetable listed on page 4.
- Observations will be formative in nature and scheduled prior to the observation date. There will be two (2) observations and each will consist of 30-60 minutes, depending on the school's master schedule.
- A post-observation conference is required within ten (10) working days of the observation. Both the observation, the post-conference observation, and all monitoring are openly conducted with full knowledge of the evaluatee.
- The performance criteria used to evaluate other professionals will be the Kentucky Framework for Teaching – Other Specialists. The table below identifies each domain within the Kentucky Framework for Teaching – Other Specialists and the specific performance measure with which it is most closely associated.

| | **Performance Measures** | | | |
|---|---|---|---|---|
| Performance Criteria | Planning | Environment | Instruction | Professionalism |
| Kentucky Framework for Teaching for Specialists | *Domain 1* Planning and Preparation | *Domain 2* Environment | *Domain 3* Delivery of Service | *Domain 4* Professional Responsibilities |

- Per requirements, the evaluation process will feature both required and optional evidences to help determine performance ratings within each performance measure and ultimately the summative rating. The table below identifies both types of evidences.

| **Evidence** | **Required / Optional** | **Documentation Process** |
|---|---|---|
| Formative Observations | Required Evidence | Item will kept on district-approved forms with the evaluator |
| PGP | Required Evidence | Item will kept on district-approved forms with the evaluator |
| Lesson Plans | Optional Evidence | Item will be kept with evaluatee |
| Communication Logs / Report | Optional Evidence | Item will be kept with evaluatee |
| Student Growth Data | Optional Evidence | Item will be kept with evaluatee |
| Participation in PLCs | Optional Evidence | Item will be kept with evaluatee |

| | | |
|---|---|---|
| Video Lessons | Optional Evidence | Item will be kept with evaluatee |
| Attendance / Duty | Optional Evidence | Item will be kept with evaluatee |
| Formal Data Reporting | Optional Evidence | Item will be kept with evaluatee |
| Professional Development | Optional Evidence | Item will be kept with evaluatee |
| EILA | Optional Evidence | Item will be kept with evaluatee |
| Scheduling of Students | Optional Evidence | Item will be kept with evaluatee |
| Maintaining Accurate Records | Optional Evidence | Item will be kept with evaluatee |

- The following table indicates the specific evidence that supports each of the performance measures.

| **Planning** | **Environment** | **Instruction** | **Professionalism** |
|---|---|---|---|
| Formal Observations | Formal Observations | Formal Observations | Formal Observations |
| PGP | PGP | PGP | PGP |
| Lesson Plans | Communication Logs | Student Growth Data | Participation in PLCs |
| Participation in PLCs | | Posting Grades | Attendance / Duty |
| Posting Grades | | | Professional Development |
| Scheduling of Students | | | EILA |
| Maintaining Accurate Records | | | Maintaining Accurate Records |

## Inst. Specialist Professional Growth Plan (Self-Evaluation) REQUIRED EVIDENCE

**Name:** _____ **Date:** _____

| Performance Measure | Beginning Score | Ending Score (Completed prior to Summative Evaluation Conference ) |
|---|---|---|
| **Planning**<br>*1A Demonstrating knowledge of current trends in specialty area and professional development*<br>*1B Demonstrating knowledge of the school's program and levels of teacher skill in delivering that program*<br>*1C Establishing goals for the instructional support program appropriate to the setting and the teachers served*<br>*1D Demonstrating knowledge of resources both within and beyond the school and district*<br>*1E Planning the instructional program integrated with the overall school program*<br>*1F Developing a plan to evaluate the instructional support program* | I D A E | I D A E |
| **Environment**<br>*2A Creating an environment of trust and respect*<br>*2B Establishing a culture for ongoing instructional improvement*<br>*2C Establishing clear procedures for teachers to gain access to the instructional support*<br>*2D Establishing and maintaining norms of behavior for professional interactions*<br>*2E Organizing physical space for workshops or training* | I D A E | I D A E |
| **Instruction**<br>*3A Collaborating with teachers in the design of instructional units and lessons*<br>*3B Engaging students in learning*<br>*3C Sharing expertise with staff*<br>*3D Locating resources for teachers to support instructional improvement*<br>*3E Demonstrating flexibility and responsiveness* | I D A E | I D A E |
| **Professionalism**<br>*4A Reflecting on practice*<br>*4B Preparing and submitting budgets and reports*<br>*4C Coordinating work with other instructional specialists*<br>*4D Participating in a professional community*<br>*4E Engaging in professional development*<br>*4F Showing professionalism including integrity and confidentiality* | I D A E | I D A E |

## Professional Growth Plan (including 30-60-90 Plan) REQUIRED EVIDENCE

**Name:**

**a. Professional Growth Goal(s) based on Self-Reflection form:**

## 30-60-90 Plan for Reaching Goals

| b. Professional Learning Activities | c. Needed Resources/Support | d. Anticipated Completion Date |
|---|---|---|
| | | *First 30 Instructional Days* |
| | | *Next 60 Instructional Days* |
| | | *Last 90 Instructional Days* |

**e. How will you assess your progress/success in addressing the Professional Growth Goal?**

**f. What is the expected impact on student learning of your professional learning activities?**

***INITIAL*** **REVIEW of PGP**

**Evaluatee Signature:** _____ **Date:** _____

**Evaluator Signature:** _____ **Date:** _____

***FINAL*** **REVIEW of PGP**

**Evaluatee Signature:** _____ **Date:** _____

**Evaluator Signature:** _____ **Date:** _____

**Formative Observations Notes**

Evaluatee Name: _____ Date: _____

| PLANNING |
| --- |
| *1A Demonstrating knowledge of current trends in specialty area and professional development* |
| *1B Demonstrating knowledge of the school's program and levels of teacher skill in delivering that program* |
| *1C Establishing goals for the instructional support program appropriate to the setting and the teachers served* |
| *1D Demonstrating knowledge of resources both within and beyond the school and district* |
| *1E Planning the instructional program integrated with the overall school program* |
| *1F Developing a plan to evaluate the instructional support program* |
| **NOTES:** |

| ENVIRONMENT |
| --- |
| *2A Creating an environment of trust and respect* |
| *2B Establishing a culture for ongoing instructional improvement* |
| *2C Establishing clear procedures for teachers to gain access to the instructional support* |
| *2D Establishing and maintaining norms of behavior for professional interactions* |
| *2E Organizing physical space for workshops or training* |
| **NOTES:** |

| INSTRUCTION |
| --- |
| *3A Collaborating with teachers in the design of instructional units and lessons* |
| *3B Engaging students in learning* |
| *3C Sharing expertise with staff* |
| *3D Locating resources for teachers to support instructional improvement* |
| *3E Demonstrating flexibility and responsiveness* |
| **NOTES:** |

| PROFESSIONALISM |
| --- |
| *4A Reflecting on practice* |
| *4B Preparing and submitting budgets and reports* |
| *4C Coordinating work with other instructional specialists* |
| *4D Participating in a professional community* |
| *4E Engaging in professional development* |
| *4F Showing professionalism including integrity and confidentiality* |
| **NOTES:** |

## Formative Evaluation Summary Form REQUIRED EVIDENCE

### Other Professionals (Instructional Specialist)

| | | | |
|---|---|---|---|
| **Evaluatee:** | | **Evaluator:** | |
| **Grade Level:** | | **School:** | |
| **Content Area:** | | **Eval. Position:** | |
| **Date of Observation:** | | **Time:** | |

**Directions:** The evaluator will refer to the rubric found within the Kentucky Framework for Teaching – Other Specialists when deciding on performance ratings.

| **PLANNING** | I | D | A | E |
|---|---|---|---|---|
| 1A - Demonstrating knowledge of current trends in specialty area and professional development | | | | |
| 1B - Demonstrating knowledge of the school's program and levels of teacher skill in delivering that program | | | | |
| 1C - Establishing goals for the instructional support program appropriate to the setting and the teachers served | | | | |
| 1D - Demonstrating knowledge of resources both within and beyond the school and district | | | | |
| 1E - Planning the instructional support program integrated with the overall school program | | | | |
| 1F - Developing a plan to evaluate the instructional support program | | | | |
| ***OVERALL PERFORMANCE MEASURE RATING for PLANNING*** | | | | |
| **ENVIRONMENT** | I | D | A | E |
| 2A – Creating an environment of trust and respect | | | | |
| 2B – Establishing a culture for ongoing instructional improvement | | | | |
| 2C – Establishing clear procedures for teachers to gain access to the instructional support | | | | |
| 2D – Establishing and maintaining norms of behavior for professional interactions | | | | |
| 2E – Organizing physical space for workshops or training | | | | |
| ***OVERALL PERFORMANCE MEASURE RATING for ENVIRONMENT*** | | | | |
| **INSTRUCTION** | I | D | A | E |
| 3A – Collaborating with teachers in the design of instructional units and lessons | | | | |
| 3B – Engaging teachers in learning new instructional skills | | | | |
| 3C – Sharing expertise with staff | | | | |
| 3D – Locating resources for teachers to support instructional improvement | | | | |
| 3E – Demonstrating flexibility and responsiveness | | | | |

| ***OVERALL PERFORMANCE MEASURE RATING for INSTRUCTION*** | | | | |
|---|---|---|---|---|
| **PROFESSIONALISM** | I | D | A | E |
| 4A - Reflecting on practice | | | | |
| 4B - Preparing and submitting budgets and reports | | | | |
| 4C - Coordinating work with other instructional specialists | | | | |
| 4D - Participating in a professional community | | | | |
| 4E - Engaging in professional development | | | | |
| 4F - Showing professionalism including integrity and confidentiality | | | | |
| ***OVERALL PERFORMANCE MEASURE RATING for PROFESSIONALISM*** | | | | |

**Evaluatee's Signature:**_____ **Date:**_____

**Evaluator's Signature:**_____ **Date:**_____

**Feedback / Comments:**

**Summative Evaluation REQUIRED – Instructional Specialists**

| Performance Criteria | Performance Measure | Rating: Select 1 performance rating |
|---|---|---|
| Kentucky Framework for Teaching – *Other Specialists*<br><br>Domain 1: Planning and Preparation | Planning | Ineffective ____<br>Developing ____<br>Accomplished ____<br>Exemplary ____ |
| **EVIDENCE USED / FEEDBACK:** | | |

| Performance Criteria | Performance Measure | Rating: Select 1 performance rating |
|---|---|---|
| Kentucky Framework for Teaching – *Other Specialists*<br><br>Domain 2: The Environment | Environment | Ineffective ____<br>Developing ____<br>Accomplished ____<br>Exemplary ____ |
| **EVIDENCE USED / FEEDBACK:** | | |

| Performance Criteria | Performance Measure | Rating: Select 1 performance rating |
|---|---|---|
| Kentucky Framework for Teaching – *Other Specialists*<br><br>Domain 3: Delivery of Service | Instruction | Ineffective ____<br>Developing ____<br>Accomplished ____<br>Exemplary ____ |
| **EVIDENCE USED / FEEDBACK:** | | |

| Performance Criteria | Performance Measure | Rating: Select 1 performance rating |
|---|---|---|
| Kentucky Framework for Teaching – *Other Specialists*<br><br>Domain 4: Professional Responsibilities | Professionalism | Ineffective ____<br>Developing ____<br>Accomplished ____<br>Exemplary ____ |
| **EVIDENCE USED / FEEDBACK:** | | |

| SUMMATIVE RATING DECISION RULES | |
|---|---|
| **IF....** | **THEN...** |
| The ENVIRONMENT MEASURE and INSTRUCTION MEASURE are rated INEFFECTIVE | The summative rating shall be INEFFECTIVE |
| The ENVIRONMENT MEASURE or INSTRUCTION MEASURE are rated INEFFECTIVE | The summative rating shall be DEVELOPING or INEFFECTIVE |
| The PLANNING MEASURE or the PROFESSIONALISM MEASURE is rated INEFFECTIVE | The summative rating shall not be EXEMPLARY. |
| Two measures are rated DEVELOPING and two measures are rated ACCOMPLISHED | The summative rating shall be ACCOMPLISHED |
| Two measures are rated ACCOMPLISHED and two measures are rated EXEMPLARY | The summative rating shall be EXEMPLARY |

Summative Rating: _____

| **Feedback / Comments:** |
|---|
| |

Evaluatee Signature: _____ Date: _____

Evaluator Signature: _____ Date: _____

## Speech Path. Professional Growth Plan (Self-Evaluation) REQUIRED EVIDENCE

**Name:** _____ **Date:** _____

| Performance Measure | Beginning Score | Ending Score (Completed prior to Summative Evaluation Conference ) |
|---|---|---|
| **Planning**<br>*1A Demonstrating knowledge and skill in the specialist therapy area holding the relevant certificate or license*<br>*1B Establishing goals for the therapy program appropriate to the setting and the students served*<br>*1C Demonstrating knowledge of District state and federal regulations and guidelines*<br>*1D Demonstrating knowledge of resources both within and beyond the school and district*<br>*1E Planning the therapy program integrated with the regular school program to meet the needs of individual students*<br>*1F Developing a plan to evaluate the therapy program* | I D A E | I D A E |
| **Environment**<br>*2A Establishing rapport with students*<br>*2B Organizing time effectively*<br>*2C Establishing and maintaining clear procedures for referrals*<br>*2D Establishing standards of conduct in the treatment center*<br>*2E Organizing physical space for testing of students and providing therapy* | I D A E | I D A E |
| **Instruction**<br>*3A Responding to referrals and evaluating student needs*<br>*3B Developing and implementing treatment plans to maximize student success*<br>*3C Communicating with families*<br>*3D Collecting information; writing reports*<br>*3E Demonstrating flexibility and responsiveness* | I D A E | I D A E |
| **Professionalism**<br>*4A Reflecting on practice*<br>*4B Collaborating with teachers and administrators*<br>*4C Maintaining an effective data management system*<br>*4D Participating in a professional community*<br>*4E Engaging and professional development*<br>*4F Showing professionalism including integrity advocacy and maintaining confidentiality* | I D A E | I D A E |

## Professional Growth Plan (including 30-60-90 Plan) REQUIRED EVIDENCE

| **Name:** | | |
|---|---|---|
| **a. Professional Growth Goal(s) based on Self-Reflection form:** | | |
| **30-60-90 Plan for Reaching Goals** | | |
| **b. Professional Learning Activities** | **c. Needed Resources/Support** | **d. Anticipated Completion Date** |
| | | *First 30 Instructional Days* |
| | | *Next 60 Instructional Days* |
| | | *Last 90 Instructional Days* |
| **e. How will you assess your progress/success in addressing the Professional Growth Goal?** | | |
| **f. What is the expected impact on student learning of your professional learning activities?** | | |

***INITIAL*** **REVIEW of PGP**

**Evaluatee Signature:** _____ **Date:** _____

**Evaluator Signature:** _____ **Date:** _____

***FINAL*** **REVIEW of PGP**

**Evaluatee Signature:** _____ **Date:** _____

**Evaluator Signature:** _____ **Date:** _____

**Formative Observations Notes**

Evaluatee Name: _____ Date: _____

| PLANNING |
| --- |
| *1A Demonstrating knowledge and skill in the specialist therapy area holding the relevant certificate or license* |
| *1B Establishing goals for the therapy program appropriate to the setting and the students served* |
| *1C Demonstrating knowledge of District state and federal regulations and guidelines* |
| *1D Demonstrating knowledge of resources both within and beyond the school and district* |
| *1E Planning the therapy program integrated with the regular school program to meet the needs of individual students* |
| *1F Developing a plan to evaluate the therapy program* |
| **NOTES:** |

| ENVIRONMENT |
| --- |
| *2A Establishing rapport with students* |
| *2B Organizing time effectively* |
| *2C Establishing and maintaining clear procedures for referrals* |
| *2D Establishing standards of conduct in the treatment center* |
| *2E Organizing physical space for testing of students and providing therapy* |
| **NOTES:** |

| INSTRUCTION |
| --- |
| *3A Responding to referrals and evaluating student needs* |
| *3B Developing and implementing treatment plans to maximize student success* |
| *3C Communicating with families* |
| *3D Collecting information; writing reports* |
| *3E Demonstrating flexibility and responsiveness* |
| **NOTES:** |

| PROFESSIONALISM |
| --- |
| *4A Reflecting on practice* |
| *4B Collaborating with teachers and administrators* |
| *4C Maintaining an effective data management system* |
| *4D Participating in a professional community* |
| *4E Engaging and professional development* |
| *4F Showing professionalism including integrity advocacy and maintaining confidentiality* |
| **NOTES:** |

## Formative Evaluation Summary Form REQUIRED EVIDENCE

### Other Professionals (Speech Pathologist)

| | | | |
|---|---|---|---|
| **Evaluatee:** | | **Evaluator:** | |
| **Grade Level:** | | **School:** | |
| **Content Area:** | | **Eval. Position:** | |
| **Date of Observation:** | | **Time:** | |

**Directions:** The evaluator will refer to the rubric found within the Kentucky Framework for Teaching – Other Specialists when deciding on performance ratings.

| **PLANNING** | I | D | A | E |
|---|---|---|---|---|
| 1A - Demonstrating knowledge and skill in the specialist therapy area holding the relevant certificate or license | | | | |
| 1B - Establishing goals for the therapy program appropriate to the setting and the students served | | | | |
| 1C- Demonstrating knowledge of District state and federal regulations and guidelines | | | | |
| 1D -Demonstrating knowledge of resources both within and beyond the school and district | | | | |
| 1E- Planning the therapy program integrated with the regular school program to meet the needs of individual students | | | | |
| 1F - Developing a plan to evaluate the therapy program | | | | |
| ***OVERALL PERFORMANCE MEASURE RATING for PLANNING*** | | | | |
| **ENVIRONMENT** | I | D | A | E |
| 2A – Establishing rapport with students Accomplished: Specialist's interactions with students are positive and respectful: students appear comfortable in the testing and treatment center. | | | | |
| 2B - Organizing time effectively | | | | |
| 2C - Establishing and maintaining clear procedures for referrals | | | | |
| 2D - Establishing standards of conduct in the treatment center | | | | |
| 2E - Organizing physical space for testing of students and providing therapy | | | | |
| ***OVERALL PERFORMANCE MEASURE RATING for ENVIRONMENT*** | | | | |
| **INSTRUCTION** | I | D | A | E |
| 3A - Responding to referrals and evaluating student needs | | | | |
| 3B - Developing and implementing treatment plans to maximize student success | | | | |
| 3C - Communicating with families | | | | |
| 3D - Collecting information; writing reports | | | | |
| 3E - Demonstrating flexibility and responsiveness | | | | |

| ***OVERALL PERFORMANCE MEASURE RATING for INSTRUCTION*** | | | | |
|---|---|---|---|---|
| **PROFESSIONALISM** | I | D | A | E |
| 4A - Reflecting on practice | | | | |
| 4B - Collaborating with teachers and administrators | | | | |
| 4C - Maintaining an effective data management system | | | | |
| 4D - Participating in a professional community | | | | |
| 4E - Engaging and professional development | | | | |
| 4F - Showing professionalism including integrity advocacy and maintaining confidentiality | | | | |
| ***OVERALL PERFORMANCE MEASURE RATING for PROFESSIONALISM*** | | | | |

**Evaluatee's Signature:**_____ **Date:**_____

**Evaluator's Signature:**_____ **Date:**_____

**Comments:**

**Summative Evaluation REQUIRED – Speech Pathologist**

| Performance Criteria | Performance Measure | Rating: Select 1 performance rating |
|---|---|---|
| Kentucky Framework for Teaching – *Other Specialists*<br><br>Domain 1: Planning and Preparation | Planning | Ineffective ____<br>Developing ____<br>Accomplished ____<br>Exemplary ____ |
| **EVIDENCE USED / FEEDBACK:** | | |

| Performance Criteria | Performance Measure | Rating: Select 1 performance rating |
|---|---|---|
| Kentucky Framework for Teaching – *Other Specialists*<br><br>Domain 2: The Environment | Environment | Ineffective ____<br>Developing ____<br>Accomplished ____<br>Exemplary ____ |
| **EVIDENCE USED / FEEDBACK:** | | |

| Performance Criteria | Performance Measure | Rating: Select 1 performance rating |
|---|---|---|
| Kentucky Framework for Teaching – *Other Specialists*<br><br>Domain 3: Delivery of Service | Instruction | Ineffective ____<br>Developing ____<br>Accomplished ____<br>Exemplary ____ |
| **EVIDENCE USED / FEEDBACK:** | | |

| Performance Criteria | Performance Measure | Rating: Select 1 performance rating |
|---|---|---|
| Kentucky Framework for Teaching – *Other Specialists*<br><br>Domain 4: Professional Responsibilities | Professionalism | Ineffective ____<br>Developing ____<br>Accomplished ____<br>Exemplary ____ |
| **EVIDENCE USED / FEEDBACK:** | | |

| SUMMATIVE RATING DECISION RULES | |
|---|---|
| **IF....** | **THEN...** |
| The ENVIRONMENT MEASURE and INSTRUCTION MEASURE are rated INEFFECTIVE | The summative rating shall be INEFFECTIVE |
| The ENVIRONMENT MEASURE or INSTRUCTION MEASURE are rated INEFFECTIVE | The summative rating shall be DEVELOPING or INEFFECTIVE |
| The PLANNING MEASURE or the PROFESSIONALISM MEASURE is rated INEFFECTIVE | The summative rating shall not be EXEMPLARY. |
| Two measures are rated DEVELOPING and two measures are rated ACCOMPLISHED | The summative rating shall be ACCOMPLISHED |
| Two measures are rated ACCOMPLISHED and two measures are rated EXEMPLARY | The summative rating shall be EXEMPLARY |

Summative Rating: _____

| **Feedback / Comments:** |
|---|
| |

Evaluatee Signature: _____ Date: _____

Evaluator Signature: _____ Date: _____

## Counselor Professional Growth Plan (Self-Evaluation) REQUIRED EVIDENCE

**Name:** _____ **Date:** _____

| Performance Measure | Beginning Score | Ending Score (Completed prior to Summative Evaluation Conference ) |
|---|---|---|
| **Planning**<br>*1A Demonstrating knowledge of counseling theory and techniques*<br>*1B Demonstrating knowledge of child and adolescent development*<br>*1C Establishing goals for the counseling program appropriate to the setting and the students served*<br>*1D Demonstrating knowledge of state and federal regulations and of resources both within and beyond the school and district*<br>*1E Plan in the counseling program integrated with the regular school program*<br>*1F Developing a plan to evaluate the counseling program* | I D A E | I D A E |
| **Environment**<br>*2A Creating an environment of respect and rapport*<br>*2B Establishing a culture for productive communication*<br>*2C Managing routines and procedures*<br>*2D Establishing standards of conduct and contributing to the culture for student behavior throughout the school*<br>*2E Organizing physical space* | I D A E | I D A E |
| **Instruction**<br>*3A Assessing student needs*<br>*3B Assisting students and teachers in the formulation of academic personal social and career plans based on knowledge of student needs*<br>*3C Using counseling techniques in individual and classroom programs*<br>*3D Brokering resources to meet needs*<br>*3E Demonstrating flexibility and responsiveness* | I D A E | I D A E |
| **Professionalism**<br>*4A Reflecting on practice*<br>*4B Maintaining records and submitting them in a timely fashion*<br>*4C Communicating with families*<br>*4D Participating in a professional community*<br>*4E Engaging in professional development*<br>*4F Showing professionalism* | I D A E | I D A E |

## Professional Growth Plan (including 30-60-90 Plan) REQUIRED EVIDENCE

| Name: | | |
|---|---|---|
| a. Professional Growth Goal(s) based on Self-Reflection form: | | |
| **30-60-90 Plan for Reaching Goals** | | |
| **b. Professional Learning Activities** | **c. Needed Resources/Support** | **d. Anticipated Completion Date** |
| | | *First 30 Instructional Days* |
| | | *Next 60 Instructional Days* |
| | | *Last 90 Instructional Days* |
| e. How will you assess your progress/success in addressing the Professional Growth Goal? | | |
| f. What is the expected impact on student learning of your professional learning activities? | | |

| |
|---|
| ***INITIAL*** **REVIEW of PGP**<br><br>**Evaluatee Signature:** _____ **Date:** _____<br><br>**Evaluator Signature:** _____ **Date:** _____ |
| ***FINAL*** **REVIEW of PGP**<br><br>**Evaluatee Signature:** _____ **Date:** _____<br><br>**Evaluator Signature:** _____ **Date:** _____ |

**Formative Observations Notes**

Evaluatee Name: _____ Date: _____

| PLANNING |
|---|
| *1A Demonstrating knowledge of counseling theory and techniques* |
| *1B Demonstrating knowledge of child and adolescent development* |
| *1C Establishing goals for the counseling program appropriate to the setting and the students served* |
| *1D Demonstrating knowledge of state and federal regulations and of resources both within and beyond the school and district* |
| *1E Plan in the counseling program integrated with the regular school program* |
| *1F Developing a plan to evaluate the counseling program* |
| **NOTES:** |

| ENVIRONMENT |
|---|
| *2A Creating an environment of respect and rapport* |
| *2B Establishing a culture for productive communication* |
| *2C Managing routines and procedures* |
| *2D Establishing standards of conduct and contributing to the culture for student behavior throughout the school* |
| *2E Organizing physical space* |
| **NOTES:** |

| INSTRUCTION |
|---|
| *3A Assessing student needs* |
| *3B Assisting students and teachers in the formulation of academic personal social and career plans based on knowledge of student needs* |
| *3C Using counseling techniques in individual and classroom programs* |
| *3D Brokering resources to meet needs* |
| *3E Demonstrating flexibility and responsiveness* |
| **NOTES:** |

| PROFESSIONALISM |
| --- |
| *4A Reflecting on practice* |
| *4B Maintaining records and submitting them in a timely fashion* |
| *4C Communicating with families* |
| *4D Participating in a professional community* |
| *4E Engaging in professional development* |
| *4F Showing professionalism* |
| **NOTES:** |

## Formative Evaluation Summary Form REQUIRED EVIDENCE

### Other Professionals (Counselor)

| | | | |
|---|---|---|---|
| **Evaluatee:** | | **Evaluator:** | |
| **Grade Level:** | | **School:** | |
| **Content Area:** | | **Eval. Position:** | |
| **Date of Observation:** | | **Time:** | |

**Directions:** The evaluator will refer to the rubric found within the Kentucky Framework for Teaching – Other Specialists when deciding on performance ratings.

| **PLANNING** | I | D | A | E |
|---|---|---|---|---|
| 1A Demonstrating knowledge of counseling theory and techniques | | | | |
| 1B Demonstrating knowledge of child and adolescent development | | | | |
| 1C Establishing goals for the counseling program appropriate to the setting and the students served | | | | |
| 1D - Demonstrating knowledge of state and federal regulations and of resources both within and beyond the school and district | | | | |
| 1E- Plan in the counseling program integrated with the regular school program | | | | |
| 1F - Developing a plan to evaluate the counseling program | | | | |
| ***OVERALL PERFORMANCE MEASURE RATING for PLANNING*** | | | | |
| **ENVIRONMENT** | I | D | A | E |
| 2A - Creating an environment of respect and rapport | | | | |
| 2B - Establishing a culture for productive communication | | | | |
| 2C - Managing routines and procedures | | | | |
| 2D - Establishing standards of conduct and contributing to the culture for student behavior throughout the school | | | | |
| 2E - Organizing physical space | | | | |
| ***OVERALL PERFORMANCE MEASURE RATING for ENVIRONMENT*** | | | | |
| **INSTRUCTION** | I | D | A | E |
| 3A - Assessing student needs | | | | |
| 3B - Assisting students and teachers in the formulation of academic personal social and career plans based on knowledge of student needs | | | | |
| 3C - Using counseling techniques is individual and classroom programs | | | | |
| 3D - Brokering resources to meet needs | | | | |
| 3E - Demonstrating flexibility and responsiveness | | | | |
| ***OVERALL PERFORMANCE MEASURE RATING for INSTRUCTION*** | | | | |
| **PROFESSIONALISM** | I | D | A | E |
| 4A - Reflecting on practice | | | | |

| | | | | |
|---|---|---|---|---|
| 4B - Maintaining records and submitting them in a timely fashion | | | | |
| 4C - Communicating with families | | | | |
| 4D - Participating in a professional community | | | | |
| 4E - Engaging in professional development | | | | |
| 4F - Showing professionalism | | | | |
| ***OVERALL PERFORMANCE MEASURE RATING for PROFESSIONALISM*** | | | | |

**Evaluatee's Signature:**_____ **Date:**_____

**Evaluator's Signature:**_____ **Date:**_____

**Comments:**

**Summative Evaluation REQUIRED – Counselor**

| Performance Criteria | Performance Measure | Rating: Select 1 performance rating |
|---|---|---|
| Kentucky Framework for Teaching – *Other Specialists*<br><br>Domain 1: Planning and Preparation | Planning | Ineffective ____<br>Developing ____<br>Accomplished ____<br>Exemplary ____ |
| **EVIDENCE USED / FEEDBACK:** | | |

| Performance Criteria | Performance Measure | Rating: Select 1 performance rating |
|---|---|---|
| Kentucky Framework for Teaching – *Other Specialists*<br><br>Domain 2: The Environment | Environment | Ineffective ____<br>Developing ____<br>Accomplished ____<br>Exemplary ____ |
| **EVIDENCE USED / FEEDBACK:** | | |

| Performance Criteria | Performance Measure | Rating: Select 1 performance rating |
|---|---|---|
| Kentucky Framework for Teaching – *Other Specialists*<br><br>Domain 3: Delivery of Service | Instruction | Ineffective ____<br>Developing ____<br>Accomplished ____<br>Exemplary ____ |
| **EVIDENCE USED / FEEDBACK:** | | |

| Performance Criteria | Performance Measure | Rating: Select 1 performance rating |
|---|---|---|
| Kentucky Framework for Teaching – *Other Specialists*<br><br>Domain 4: Professional Responsibilities | Professionalism | Ineffective ____<br>Developing ____<br>Accomplished ____<br>Exemplary ____ |
| **EVIDENCE USED / FEEDBACK:** | | |

| SUMMATIVE RATING DECISION RULES | |
|---|---|
| **IF....** | **THEN...** |
| The ENVIRONMENT MEASURE and INSTRUCTION MEASURE are rated INEFFECTIVE | The summative rating shall be INEFFECTIVE |
| The ENVIRONMENT MEASURE or INSTRUCTION MEASURE are rated INEFFECTIVE | The summative rating shall be DEVELOPING or INEFFECTIVE |
| The PLANNING MEASURE or the PROFESSIONALISM MEASURE is rated INEFFECTIVE | The summative rating shall not be EXEMPLARY. |
| Two measures are rated DEVELOPING and two measures are rated ACCOMPLISHED | The summative rating shall be ACCOMPLISHED |
| Two measures are rated ACCOMPLISHED and two measures are rated EXEMPLARY | The summative rating shall be EXEMPLARY |

Summative Rating: _____

| **Feedback / Comments:** |
|---|
| |

Evaluatee Signature: _____ Date: _____

Evaluator Signature: _____ Date: _____

## Media Spec. Professional Growth Plan (Self-Evaluation) REQUIRED EVIDENCE

**Name:** _____ **Date:** _____

| Performance Measure | Beginning Score | Ending Score (Completed prior to Summative Evaluation Conference ) |
|---|---|---|
| **Planning**<br>*1A Demonstrating Knowledge of Content Curriculum and Process*<br>*1B Demonstrating Knowledge of Students*<br>*1C Supporting Instructional Goals*<br>*1D - Demonstrating Knowledge and Use of Resources*<br>*1E- Demonstrating a Knowledge of Literature and Lifelong Learning*<br>*1F - Collaborating in the Design of Instructional Experiences* | I D A E | I D A E |
| **Environment**<br>*2A - Creating an environment of respect and rapport*<br>*2B - Establishing a Culture for Learning*<br>*2C - Managing Library Procedures*<br>*2D - Managing student behavior*<br>*2E - Organizing physical space* | I D A E | I D A E |
| **Instruction**<br>*3A - Communicating Clearly and Accurately*<br>*3B - Using Questioning and Research Techniques*<br>*3C - Engaging Students in Learning*<br>*3D - Assessment in instruction (whole class, one-on-one and small group)*<br>*3E - Demonstrating Flexibility and Responsiveness* | I D A E | I D A E |
| **Professionalism**<br>*4A - Reflecting on Practice*<br>*4B - Maintaining Accurate Records*<br>*4C - Communicating with School Staff and Community*<br>*4D - Participating in a Professional Community*<br>*4E - Growing and Developing Professionally*<br>*4F - Collection Development and Maintenance*<br>*4G - Managing the Library Budget*<br>*4H - Managing Personnel*<br>*4I - Professional ethics* | I D A E | I D A E |

## Professional Growth Plan (including 30-60-90 Plan) REQUIRED EVIDENCE

| Name: | | |
|---|---|---|
| a. Professional Growth Goal(s) based on Self-Reflection form: | | |
| **30-60-90 Plan for Reaching Goals** | | |
| **b. Professional Learning Activities** | **c. Needed Resources/Support** | **d. Anticipated Completion Date** |
| | | *First 30 Instructional Days* |
| | | *Next 60 Instructional Days* |
| | | *Last 90 Instructional Days* |
| e. How will you assess your progress/success in addressing the Professional Growth Goal? | | |
| f. What is the expected impact on student learning of your professional learning activities? | | |

***INITIAL*** **REVIEW of PGP**

**Evaluatee Signature:** _____ **Date:** _____

**Evaluator Signature:** _____ **Date:** _____

***FINAL*** **REVIEW of PGP**

**Evaluatee Signature:** _____ **Date:** _____

**Evaluator Signature:** _____ **Date:** _____

**Formative Observations Notes**

Evaluatee Name: _____ Date: _____

| PLANNING |
| --- |
| *1A Demonstrating Knowledge of Content Curriculum and Process* |
| *1B Demonstrating Knowledge of Students* |
| *1C Supporting Instructional Goals* |
| *1D - Demonstrating Knowledge and Use of Resources* |
| *1E- Demonstrating a Knowledge of Literature and Lifelong Learning* |
| *1F - Collaborating in the Design of Instructional Experiences* |
| **NOTES:** |

| ENVIRONMENT |
| --- |
| *2A - Creating an environment of respect and rapport* |
| *2B - Establishing a Culture for Learning* |
| *2C - Managing Library Procedures* |
| *2D - Managing student behavior* |
| *2E - Organizing physical space* |
| **NOTES:** |

| INSTRUCTION |
| --- |
| *3A - Communicating Clearly and Accurately* |
| *3B - Using Questioning and Research Techniques* |
| *3C - Engaging Students in Learning* |
| *3D - Assessment in instruction (whole class, one-on-one and small group)* |
| *3E - Demonstrating Flexibility and Responsiveness* |
| **NOTES:** |

| PROFESSIONALISM |
| --- |
| *4A - Reflecting on Practice* |
| *4B - Maintaining Accurate Records* |
| *4C - Communicating with School Staff and Community* |
| *4D - Participating in a Professional Community* |
| *4E - Growing and Developing Professionally* |
| *4F - Collection Development and Maintenance* |
| *4G - Managing the Library Budget* |
| *4H - Managing Personnel* |
| *4I - Professional ethics* |
| **NOTES:** |

## Formative Evaluation Summary Form REQUIRED EVIDENCE

### Other Professionals (Media Specialist)

| | | | |
|---|---|---|---|
| **Evaluatee:** | | **Evaluator:** | |
| **Grade Level:** | | **School:** | |
| **Content Area:** | | **Eval. Position:** | |
| **Date of Observation:** | | **Time:** | |

**Directions:** The evaluator will refer to the rubric found within the Kentucky Framework for Teaching – Other Specialists when deciding on performance ratings.

| **PLANNING** | I | D | A | E |
|---|---|---|---|---|
| 1A Demonstrating Knowledge of Content Curriculum and Process | | | | |
| 1B Demonstrating Knowledge of Students | | | | |
| 1C Supporting Instructional Goals | | | | |
| 1D - Demonstrating Knowledge and Use of Resources | | | | |
| 1E- Demonstrating a Knowledge of Literature and Lifelong Learning | | | | |
| 1F - Collaborating in the Design of Instructional Experiences | | | | |
| ***OVERALL PERFORMANCE MEASURE RATING for PLANNING*** | | | | |
| **ENVIRONMENT** | I | D | A | E |
| 2A - Creating an environment of respect and rapport | | | | |
| 2B - Establishing a Culture for Learning | | | | |
| 2C - Managing Library Procedures | | | | |
| 2D - Managing student behavior | | | | |
| 2E - Organizing physical space | | | | |
| ***OVERALL PERFORMANCE MEASURE RATING for ENVIRONMENT*** | | | | |
| **INSTRUCTION** | I | D | A | E |
| 3A - Communicating Clearly and Accurately | | | | |
| 3B - Using Questioning and Research Techniques | | | | |
| 3C - Engaging Students in Learning | | | | |
| 3D - Assessment in instruction (whole class, one-on-one and small group) | | | | |
| 3E - Demonstrating Flexibility and Responsiveness | | | | |
| ***OVERALL PERFORMANCE MEASURE RATING for INSTRUCTION*** | | | | |
| **PROFESSIONALISM** | I | D | A | E |
| 4A - Reflecting on Practice | | | | |
| 4B - Maintaining Accurate Records | | | | |
| 4C - Communicating with School Staff and Community | | | | |
| 4D - Participating in a Professional Community | | | | |
| 4E - Growing and Developing Professionally | | | | |
| 4F - Collection Development and Maintenance | | | | |
| 4G - Managing the Library Budget | | | | |
| 4H - Managing Personnel | | | | |
| 4I - Professional ethics | | | | |
| ***OVERALL PERFORMANCE MEASURE RATING for PROFESSIONALISM*** | | | | |

**Evaluatee's Signature:**_____ **Date:**_____

**Evaluator's Signature:**_____ **Date:**_____

**Comments:**

**Summative Evaluation REQUIRED – Media Specialist**

| Performance Criteria | Performance Measure | Rating: Select 1 performance rating |
|---|---|---|
| Kentucky Framework for Teaching – *Other Specialists*<br><br>Domain 1: Planning and Preparation | Planning | Ineffective ____<br>Developing ____<br>Accomplished ____<br>Exemplary ____ |
| **EVIDENCE USED / FEEDBACK:** | | |

| Performance Criteria | Performance Measure | Rating: Select 1 performance rating |
|---|---|---|
| Kentucky Framework for Teaching – *Other Specialists*<br><br>Domain 2: The Environment | Environment | Ineffective ____<br>Developing ____<br>Accomplished ____<br>Exemplary ____ |
| **EVIDENCE USED / FEEDBACK:** | | |

| Performance Criteria | Performance Measure | Rating: Select 1 performance rating |
|---|---|---|
| Kentucky Framework for Teaching – *Other Specialists*<br><br>Domain 3: Delivery of Service | Instruction | Ineffective ____<br>Developing ____<br>Accomplished ____<br>Exemplary ____ |
| **EVIDENCE USED / FEEDBACK:** | | |

| Performance Criteria | Performance Measure | Rating: Select 1 performance rating |
|---|---|---|
| Kentucky Framework for Teaching – *Other Specialists*<br><br>Domain 4: Professional Responsibilities | Professionalism | Ineffective ____<br>Developing ____<br>Accomplished ____<br>Exemplary ____ |
| **EVIDENCE USED / FEEDBACK:** | | |

| SUMMATIVE RATING DECISION RULES | |
|---|---|
| **IF....** | **THEN...** |
| The ENVIRONMENT MEASURE and INSTRUCTION MEASURE are rated INEFFECTIVE | The summative rating shall be INEFFECTIVE |
| The ENVIRONMENT MEASURE or INSTRUCTION MEASURE are rated INEFFECTIVE | The summative rating shall be DEVELOPING or INEFFECTIVE |
| The PLANNING MEASURE or the PROFESSIONALISM MEASURE is rated INEFFECTIVE | The summative rating shall not be EXEMPLARY. |
| Two measures are rated DEVELOPING and two measures are rated ACCOMPLISHED | The summative rating shall be ACCOMPLISHED |
| Two measures are rated ACCOMPLISHED and two measures are rated EXEMPLARY | The summative rating shall be EXEMPLARY |

Summative Rating: _____

| **Feedback / Comments:** |
|---|
| |

Evaluatee Signature: _____ Date: _____

Evaluator Signature: _____ Date: _____

## Psychologist Professional Growth Plan (Self-Evaluation) REQUIRED EVIDENCE

**Name:** _____ **Date:** _____

| Performance Measure | Beginning Score | Ending Score (Completed prior to Summative Evaluation Conference ) |
|---|---|---|
| **Planning**<br>*1A Demonstrating knowledge and skill in using psychological instruments to evaluate students*<br>*2A Demonstrating knowledge of child and adolescent development and psychopathology*<br>*3A Establishing goals for the psychology program appropriate to the setting and the students served*<br>*4A Demonstrating knowledge of state and federal regulations and the resources both within and beyond the school and district*<br>*5A Planning the psychology program integrated with the regular school program to meet the needs of individual students and including prevention*<br>*6A Developing a plan to evaluate the psychology program* | I D A E | I D A E |
| **Environment**<br>*1B Establishing rapport with students*<br>*2B Establishing a culture for positive mental health throughout the school*<br>*3B Establishing and maintaining clear procedures for referrals*<br>*4B Establishing standards of conduct in the testing center*<br>*5B Organizing physical space for testing the students and storage of materials* | I D A E | I D A E |
| **Instruction**<br>*1C Responding to referrals consulting with teachers and administrators*<br>*2C Evaluating student needs and compliance with national Association of school psychologists NASP guidelines*<br>*3C Chairing evaluation team*<br>*4C Planning interventions to maximize student's likelihood of success*<br>*5C Maintaining contact w/physicians & community mental health service providers*<br>*6C Demonstrating flexibility and responsiveness* | I D A E | I D A E |
| **Professionalism**<br>*1D Reflecting on practice*<br>*2D Communicating with families*<br>*3D Maintaining accurate records*<br>*4D Participating in a professional community*<br>*5D Engaging in professional development*<br>*6D Showing professionalism* | I D A E | I D A E |

## Professional Growth Plan (including 30-60-90 Plan) REQUIRED EVIDENCE

| Name: | | |
|---|---|---|
| a. Professional Growth Goal(s) based on Self-Reflection form: | | |
| **30-60-90 Plan for Reaching Goals** | | |
| **b. Professional Learning Activities** | **c. Needed Resources/Support** | **d. Anticipated Completion Date** |
| | | *First 30 Instructional Days* |
| | | *Next 60 Instructional Days* |
| | | *Last 90 Instructional Days* |
| e. How will you assess your progress/success in addressing the Professional Growth Goal? | | |
| f. What is the expected impact on student learning of your professional learning activities? | | |

***INITIAL*** **REVIEW of PGP**

**Evaluatee Signature:** _____ **Date:** _____

**Evaluator Signature:** _____ **Date:** _____

***FINAL*** **REVIEW of PGP**

**Evaluatee Signature:** _____ **Date:** _____

**Evaluator Signature:** _____ **Date:** _____

**Formative Observations Notes**

Evaluatee Name: _____ Date: _____

| PLANNING |
| --- |
| *1A Demonstrating knowledge and skill in using psychological instruments to evaluate students* |
| *2A Demonstrating knowledge of child and adolescent development and psychopathology* |
| *3A Establishing goals for the psychology program appropriate to the setting and the students served* |
| *4A Demonstrating knowledge of state and federal regulations and the resources both within and beyond the school and district* |
| *5A Planning the psychology program integrated with the regular school program to meet the needs of individual students and including prevention* |
| *6A Developing a plan to evaluate the psychology program* |
| **NOTES:** |

| ENVIRONMENT |
| --- |
| *1B Establishing rapport with students* |
| *2B Establishing a culture for positive mental health throughout the school* |
| *3B Establishing and maintaining clear procedures for referrals* |
| *4B Establishing standards of conduct in the testing center* |
| *5B Organizing physical space for testing the students and storage of materials* |
| **NOTES:** |

| INSTRUCTION |
| --- |
| *1C Responding to referrals consulting with teachers and administrators* |
| *2C Evaluating student needs and compliance with national Association of school psychologists NASP guidelines* |
| *3C Chairing evaluation team* |
| *4C Planning interventions to maximize student's likelihood of success* |
| *5C Maintaining contact with physicians and community mental health service providers* |
| *6C Demonstrating flexibility and responsiveness* |
| **NOTES:** |

| PROFESSIONALISM |
| --- |
| *1D Reflecting on practice* |
| *2D Communicating with families* |
| *3D Maintaining accurate records* |
| *4D Participating in a professional community* |
| *5D Engaging in professional development* |
| *6D Showing professionalism* |
| **NOTES:** |

## Formative Evaluation Summary Form REQUIRED EVIDENCE

### Other Professionals (School Psychologist)

| | | | |
|---|---|---|---|
| **Evaluatee:** | | **Evaluator:** | |
| **Grade Level:** | | **School:** | |
| **Content Area:** | | **Eval. Position:** | |
| **Date of Observation:** | | **Time:** | |

**Directions:** The evaluator will refer to the rubric found within the Kentucky Framework for Teaching – Other Specialists when deciding on performance ratings.

| **PLANNING** | I | D | A | E |
|---|---|---|---|---|
| 1A Demonstrating knowledge and skill in using psychological instruments to evaluate students | | | | |
| 1B Demonstrating knowledge of child and adolescent development and psychopathology | | | | |
| 1C Establishing goals for the psychology program appropriate to the setting and the students served | | | | |
| 1D - Demonstrating knowledge of state and federal regulations and the resources both within and beyond the school and district | | | | |
| 1E- Planning the psychology program integrated with the regular school program to meet the needs of individual students and including prevention | | | | |
| 1F - Developing a plan to evaluate the psychology program | | | | |
| ***OVERALL PERFORMANCE MEASURE RATING for PLANNING*** | | | | |
| **ENVIRONMENT** | I | D | A | E |
| 2A - Establishing rapport with students | | | | |
| 2B - Establishing a culture for positive mental health throughout the school | | | | |
| 2C - Establishing and maintaining clear procedures for referrals | | | | |
| 2D - Establishing standards of conduct in the testing center | | | | |
| 2E - Organizing physical space for testing the students and storage of materials | | | | |
| ***OVERALL PERFORMANCE MEASURE RATING for ENVIRONMENT*** | | | | |
| **INSTRUCTION** | I | D | A | E |
| 3A - Responding to referrals consulting with teachers and administrators | | | | |
| 3B - Evaluating student needs and compliance with National Association of School psychologists NASP guidelines | | | | |
| 3C - Chairing evaluation team | | | | |
| 3D - Planning interventions to maximize student's likelihood of success | | | | |

| | | | | |
|---|---|---|---|---|
| 3E - Maintaining contact with physicians and community mental health service providers | | | | |
| 3F - Demonstrating flexibility and responsiveness | | | | |
| ***OVERALL PERFORMANCE MEASURE RATING for INSTRUCTION*** | | | | |
| **PROFESSIONALISM** | I | D | A | E |
| 4A - Reflecting on practice | | | | |
| 4B - Communicating with families | | | | |
| 4C - Maintaining accurate records | | | | |
| 4D - Participating in a professional community | | | | |
| 4E - Engaging in professional development | | | | |
| 4F - Showing professionalism | | | | |
| ***OVERALL PERFORMANCE MEASURE RATING for PROFESSIONALISM*** | | | | |

**Evaluatee's Signature:**_____ **Date:**_____

**Evaluator's Signature:**_____ **Date:**_____

**Comments:**

**Summative Evaluation REQUIRED – School Psychologist**

| Performance Criteria | Performance Measure | Rating: Select 1 performance rating |
|---|---|---|
| Kentucky Framework for Teaching – *Other Specialists*<br><br>Domain 1: Planning and Preparation | Planning | Ineffective ____<br>Developing ____<br>Accomplished ____<br>Exemplary ____ |
| **EVIDENCE USED / FEEDBACK:** | | |

| Performance Criteria | Performance Measure | Rating: Select 1 performance rating |
|---|---|---|
| Kentucky Framework for Teaching – *Other Specialists*<br><br>Domain 2: The Environment | Environment | Ineffective ____<br>Developing ____<br>Accomplished ____<br>Exemplary ____ |
| **EVIDENCE USED / FEEDBACK:** | | |

| Performance Criteria | Performance Measure | Rating: Select 1 performance rating |
|---|---|---|
| Kentucky Framework for Teaching – *Other Specialists*<br><br>Domain 3: Delivery of Service | Instruction | Ineffective ____<br>Developing ____<br>Accomplished ____<br>Exemplary ____ |
| **EVIDENCE USED / FEEDBACK:** | | |

| Performance Criteria | Performance Measure | Rating: Select 1 performance rating |
|---|---|---|
| Kentucky Framework for Teaching – *Other Specialists*<br><br>Domain 4: Professional Responsibilities | Professionalism | Ineffective ____<br>Developing ____<br>Accomplished ____<br>Exemplary ____ |
| **EVIDENCE USED / FEEDBACK:** | | |

| SUMMATIVE RATING DECISION RULES | |
|---|---|
| **IF....** | **THEN...** |
| The ENVIRONMENT MEASURE and INSTRUCTION MEASURE are rated INEFFECTIVE | The summative rating shall be INEFFECTIVE |
| The ENVIRONMENT MEASURE or INSTRUCTION MEASURE are rated INEFFECTIVE | The summative rating shall be DEVELOPING or INEFFECTIVE |
| The PLANNING MEASURE or the PROFESSIONALISM MEASURE is rated INEFFECTIVE | The summative rating shall not be EXEMPLARY. |
| Two measures are rated DEVELOPING and two measures are rated ACCOMPLISHED | The summative rating shall be ACCOMPLISHED |
| Two measures are rated ACCOMPLISHED and two measures are rated EXEMPLARY | The summative rating shall be EXEMPLARY |

Summative Rating: _____

| **Feedback / Comments:** |
|---|
| |

Evaluatee Signature: _____ Date: _____
Evaluator Signature: _____ Date: _____

**DISTRICT PERSONNEL:** Director of Special Ed. Director of Pupil Personnel, Transportation Director, Director of Food Services, Director of District Programs, Director of Federal Programs, District Instructional Supervisor, Athletic Director

- District certified personnel will be evaluated annually according to the timetable listed on page 4.
- Observations will be formative in nature and scheduled prior to the observation date. There will be two (2) observations and each will consist of 30-60 minutes.
- A post-observation conference is required within ten (10) working days of the observation. Both the observation, the post-conference observation, and all monitoring are openly conducted with full knowledge of the evaluatee.
- The performance criteria used to evaluate district personnel will be the Professional Standards for Education Leaders. The table below identifies how the various standards align with the four performance measure.

| | **Performance Measures** | | | |
|---|---|---|---|---|
| Performance Criteria | Planning | Environment | Instruction | Professional |
| PSEL Standards | ***Standard 1*** Mission, Vision, and Core Values<br><br>***Standard 9*** Operations and Management<br><br>***Standard 10*** School Improvement | ***Standard 3*** Equity and Cultural Responsiveness<br><br>***Standard 7*** Professional Community for Teachers and Staff | ***Standard 4*** Curriculum, Instruction and Assessment<br><br>***Standard 5*** Community of Care and Support for Students | ***Standard 2*** Ethics and Professional Norms<br><br>***Standard 8*** Meaningful Engagement of Families and Community |

- Per requirements, the evaluation process will feature both required and optional evidences to help determine performance ratings within each performance measure and ultimately the summative rating. The table below identifies both types of evidences.

| Evidence | Required / Optional | Documentation Process |
|---|---|---|
| Formative Observations | Required Evidence | Item will kept on district-approved forms with the evaluator |
| PGP | Required Evidence | Item will kept on district-approved forms with the evaluator |
| Communication Logs / Report | Optional Evidence | Item will be kept with evaluatee |
| Student Growth Data | Optional Evidence | Item will be kept with evaluatee |
| Participation in PLCs | Optional Evidence | Item will be kept with evaluatee |
| Attendance / Duty | Optional Evidence | Item will be kept with evaluatee |
| Formal Data Reporting | Optional Evidence | Item will be kept with evaluatee |
| Professional Development | Optional Evidence | Item will be kept with evaluatee |
| EILA | Optional Evidence | Item will be kept with evaluatee |
| Maintaining Accurate Records | Optional Evidence | Item will be kept with evaluatee |
| Maintaining State / Federal Required Records | Optional Evidence | Item will be kept with evaluatee |

- The following table indicates the specific evidence that supports each of the performance measures.

| Planning | Environment | Instruction | Professionalism |
|---|---|---|---|
| Formal Observations<br>PGP<br>Participation in PLCs<br>Maintaining Accurate Records<br>Maintaining State / Federal Required Records | Formal Observations<br>PGP<br>Communication Logs | Formal Observations<br>PGP<br>Student Growth Data | Formal Observations<br>PGP<br>Participation in PLCs<br>Attendance / Duty<br>Professional Development<br>EILA<br>Maintaining Accurate Records |

## District Cert. Professional Growth Plan (Self-Evaluation) REQUIRED EVIDENCE

**Name:** _____ **Date:** _____

| Performance Measure | Beginning Score | Ending Score (Completed prior to Summative Evaluation Conference ) |
|---|---|---|
| **Planning**<br>Standard 1: Mission, Vision, and Core Values<br>Standard 9: Operations and Management<br>Standard 10: School Improvement | I D A E | I D A E |
| **Environment**<br>Standard 3: Equity and Cultural Responsiveness<br>Standard 7: Professional Community for Teachers and Staff | I D A E | I D A E |
| **Instruction**<br>Standard 4: Curriculum, Instruction and Assessment<br>Standard 5: Community of Care and Support for Students<br>Standard 6: Professional Capacity of School Personnel | I D A E | I D A E |
| **Professionalism**<br>Standard 2: Ethics and Professional Norms<br>Standard 8: Meaningful Engagement of Families and Community | I D A E | I D A E |

Name: _____ Date: _____

## Professional Growth Plan (including 30-60-90 Plan) REQUIRED EVIDENCE

| Name: | | |
|---|---|---|
| a. Professional Growth Goal(s) based on Self-Reflection form: | | |
| **30-60-90 Plan for Reaching Goals** | | |
| **b. Professional Learning Activities** | **c. Needed Resources/Support** | **d. Anticipated Completion Date** |
| | | *First 30 Instructional Days* |
| | | *Next 60 Instructional Days* |
| | | *Last 90 Instructional Days* |
| e. How will you assess your progress/success in addressing the Professional Growth Goal? | | |
| f. What is the expected impact on student learning of your professional learning activities? | | |

***INITIAL*** **REVIEW of PGP**

**Evaluatee Signature:** _____ **Date:** _____

**Evaluator Signature:** _____ **Date:** _____

***FINAL*** **REVIEW of PGP**

**Evaluatee Signature:** _____ **Date:** _____

**Evaluator Signature:** _____ **Date:** _____

**Formative Observations Notes**

Professional Name: _____ Date: _____

| PLANNING |
|---|
| ***Standard 1*** *Mission, Vision, and Core Values* ***Standard 9*** *Operations and Management* ***Standard 10*** *School Improvement* |
| **NOTES:** |

| ENVIRONMENT |
|---|
| ***Standard 3*** *Equity and Cultural Responsiveness* ***Standard 7*** *Professional Community for Teachers and Staff* |
| **NOTES:** |

| INSTRUCTION |
|---|
| ***Standard 4*** *Curriculum, Instruction and Assessment* ***Standard 5*** *Community of Care and Support for Students* ***Standard 6*** *Professional Capacity of School Personnel* |
| **NOTES:** |

| PROFESSIONALISM |
|---|
| ***Standard 2*** *Ethics and Professional Norms* ***Standard 8*** *Meaningful Engagement of Families and Community* |
| **NOTES:** |

## Formative Evaluation Summary Form REQUIRED EVIDENCE

### District Certified Personnel

| | | | |
|---|---|---|---|
| **Evaluatee:** | | **Evaluator:** | |
| **Grade Level:** | | **School:** | |
| **Content Area:** | | **Eval. Position:** | |
| **Date of Observation:** | | **Time:** | |

**Directions:** The evaluator will refer to the rubric found within the Professional Standards for Educational Leaders when deciding on performance ratings.

| **PLANNING** | I | D | A | E |
|---|---|---|---|---|
| Standard 1: Mission, Vision, and Core Values | | | | |
| Standard 9: Operations and Management | | | | |
| Standard 10: School Improvement | | | | |
| ***OVERALL PERFORMANCE MEASURE RATING for PLANNING*** | | | | |
| **ENVIRONMENT** | I | D | A | E |
| Standard 3: Equity and Cultural Responsiveness | | | | |
| Standard 7: Professional Community for Teachers and Staff | | | | |
| ***OVERALL PERFORMANCE MEASURE RATING for ENVIRONMENT*** | | | | |
| **INSTRUCTION** | I | D | A | E |
| Standard 4: Curriculum, Instruction and Assessment | | | | |
| Standard 5: Community of Care and Support for Students | | | | |
| Standard 6: Professional Capacity of School Personnel | | | | |
| ***OVERALL PERFORMANCE MEASURE RATING for INSTRUCTION*** | | | | |
| **PROFESSIONALISM** | I | D | A | E |
| Standard 2: Ethics and Professional Norms | | | | |
| Standard 8: Meaningful Engagement of Families and Community | | | | |
| ***OVERALL PERFORMANCE MEASURE RATING for PROFESSIONALISM*** | | | | |

**Evaluatee's Signature:**_____ **Date:**_____

**Evaluator's Signature:**_____ **Date:**_____

**Feedback / Comments:**

**Summative Evaluation REQUIRED – District Certified**

| Performance Criteria | Performance Measure | Rating: Select 1 performance rating |
|---|---|---|
| PSEL Standards<br>Standard 1, 9, 10 | Planning | Ineffective ____<br>Developing ____<br>Accomplished ____<br>Exemplary ____ |
| **EVIDENCE USED / FEEDBACK:** | | |

| Performance Criteria | Performance Measure | Rating: Select 1 performance rating |
|---|---|---|
| PSEL Standards<br>Standards 3 , 7 | Environment | Ineffective ____<br>Developing ____<br>Accomplished ____<br>Exemplary ____ |
| **EVIDENCE USED / FEEDBACK:** | | |

| Performance Criteria | Performance Measure | Rating: Select 1 performance rating |
|---|---|---|
| PSEL Standards<br>Standards 4, 5, 6 | Instruction | Ineffective ____<br>Developing ____<br>Accomplished ____<br>Exemplary ____ |
| **EVIDENCE USED / FEEDBACK:** | | |

| Performance Criteria | Performance Measure | Rating: Select 1 performance rating |
|---|---|---|
| PSEL Standards<br>Standards 2, 8 | Professionalism | Ineffective ____<br>Developing ____<br>Accomplished ____<br>Exemplary ____ |
| **EVIDENCE USED / FEEDBACK:** | | |

| SUMMATIVE RATING DECISION RULES | |
|---|---|
| **IF....** | **THEN...** |
| The ENVIRONMENT MEASURE and INSTRUCTION MEASURE are rated INEFFECTIVE | The summative rating shall be INEFFECTIVE |
| The ENVIRONMENT MEASURE or INSTRUCTION MEASURE are rated INEFFECTIVE | The summative rating shall be DEVELOPING or INEFFECTIVE |
| The PLANNING MEASURE or the PROFESSIONALISM MEASURE is rated INEFFECTIVE | The summative rating shall not be EXEMPLARY. |
| Two measures are rated DEVELOPING and two measures are rated ACCOMPLISHED | The summative rating shall be ACCOMPLISHED |
| Two measures are rated ACCOMPLISHED and two measures are rated EXEMPLARY | The summative rating shall be EXEMPLARY |

Summative Professional Rating: _____

| **Feedback / Comments:** |
|---|
| |

Evaluatee Signature: _____ Date: _____

Evaluator Signature: _____ Date: _____

**Corrective Action Plan**

A corrective action plan is a plan developed collaboratively by the evaluator and the evaluatee. The plan may be written at any time during the school year when improvement is needed to correct one or more deficiencies that cannot wait for the formal observation, but shall be written if the evaluatee receives an "ineffective" for any component in any of the four (4) domains. Specific assistance and activities are identified in the corrective action plan.

Corrective action plans shall be reviewed continuously (at least once every 30 days) until performance is determined to achieve the defined goals/objectives. Review of corrective action plans shall be documented on the McCreary County School District Corrective Action form.

It is the evaluator's responsibility to document all actions taken to assist the evaluatee in achieving the goals/objectives identified in the corrective action plan.

**Please see page 78 for the Corrective Action Form**

**Local Appeals Procedure**

(a) The certified employees of the local school district shall elect two (2) members to serve on the local appeals panel. The two (2) certified staff members receiving the highest number of votes shall serve as the selected members. Alternates shall be listed according to highest number of votes received. Alternates shall be used in the event a regular panel member cannot serve or in the event of a conflict of interest. The Board of Education shall appoint one (1) certified staff member to the appeals panel. The committee shall elect a chairperson for each appeals process.

The Board of Education shall also appoint one certified employee as alternate to serve in the absence of the first appointee. (Interning certified staff are not eligible to serve on the appeals panel.)

(b) The members of the appeals panel shall be elected/appointed for a two-year term (a year defined as running from July 1 to June 30) with the option of being re-elected or reappointed.

(c) Any certified employee who requests a review of his/her summative evaluation by the local appeals panel shall submit a written request to the local appeals panel within five (5) working days of receipt of the evaluation. Appeals shall be presented on forms prepared by the local district. No member of the panel shall serve on any appeal in which he/she was the evaluator. No panel member shall serve on any appeal brought by the member's immediate family (father, mother, brother, sister, husband, wife, son, daughter, aunt, uncle, son-in-law, and daughter-in-law).

(d) Panel members shall meet at a time and place set by the chairperson. The appealing employee and the evaluator shall be notified of the meeting time and place; the hearing shall otherwise be a closed meeting. Both the appealing employee and employer shall be provided copies of all documentation submitted.

(e) The appealing employee shall release to the panel all evaluation material/information. The chairperson shall review all submitted information and may disallow information to be presented in the hearing which is determined if relevant to the appeal. The burden of proof shall be on the employee to the panel. The evaluator shall be allowed the opportunity to respond to the claims of the appealing employee and to present written record which supports the summative evaluation. The panel shall review all documents presented to it and be allowed to interview both the appealing employee and the evaluator. The appealing employee and employer have a right to representation.

(f) Upon receiving the request the panel will schedule a PRELIMINARY HEARING to provide documentation to all parties and the panel. The chairperson of the panel shall be elected by the panel for each appeal. Four (4) copies of all documentation to be considered in the appeal shall be made available at this time. One copy for each of the committee and evaluator/evaluatee shall be provided. The chairperson shall convene the hearing and explain procedures for the process. The evaluatee and evaluator may be represented by legal counsel or their chosen representative. The Board of Education shall provide legal counsel for the panel if requested. The evaluatee has the right to determine whether the hearing is open or closed. A closed hearing will include the panel, evaluatee, evaluator and their chosen representatives. Witnesses may be called by either party, but will not be allowed to observe the hearing process other than during their testimony. After the evaluatee and evaluator leave, the appeals committee shall remain and review all documents and formulate questions for the hearing. Within three

(3) working days an APPEALS PANEL HEARING will convene to allow the evaluatee and evaluator to present statements, documentation, witnesses and any other information pertinent to the appeal. Again, the chairperson will convene the hearing and establish procedures. The evaluatee shall present his/her opening statement followed by the evaluator's opening statement. Each party will then be allowed to present his/her documentation including witnesses pertinent to the summative evaluation. Both substance and procedural issues shall be considered by the panel. An opportunity for questioning each party shall be provided. The three (3) member panel will have the right to question both the evaluatee and the evaluator. The evaluatee and evaluator will then be permitted to leave and the panel will consider all information provided them. The panel may determine if there is a need to tape record the hearing. Tape(s) shall be kept in a locked file in the Central Office for a minimum of one (1) year from the date of the hearing for future discussions of the panel.

(g) The panel shall make a recommendation to the district superintendent within fifteen (15) working days from the date of filing the appeal. The superintendent shall file the recommendation in the employee's personnel file with the original evaluation form.

(h) The panel's recommendation may include one of the following:

a. a new evaluation by a second certified evaluator

b. uphold the original evaluation

c. remove the summative or any part of the summative from the personnel file

The chairperson of the panel shall present the decision to the Superintendent for action within three (3) working days of the panel's decision.

Any evaluatee who feels that the procedural issues were violated may appeal the decision to the Kentucky Board of Education.

**State Appeals Procedure**

a) The State Board of Education shall appoint a committee of three (3) board members to serve on the State Evaluation Appeals Panel. Said panel shall have no jurisdiction relative to complaints involving the professional judgmental conclusion of evaluations.

(b) The certified employee must submit a written request to the Commissioner

of Education for a hearing to the State Evaluation Appeals Panel. A specific description of the complaint and grounds for appeal must be submitted with this request.

(c) The State Evaluation Appeals Panel, or the Department of Education at its direction shall review the complaint and investigate to determine if a hearing should be granted.

(d) If a hearing is granted, all involved parties shall have an opportunity to speak before the appeals panel.

(e) A decision of the appeals panel shall be rendered within fifteen working days after a hearing.

**McCreary County School District**

**Appeals Panel Hearing Request Form**

I, _____ have been evaluated by_____ during the current evaluative cycle. My disagreement with the findings of the summative evaluation have been thoroughly discussed with the evaluator.

I respectfully request the_____ School District Evaluation Appeals panel to hear my appeal.

This appeal challenges the summative findings on:

___substance

___procedure

___both substance & procedure

_____Signature

_____Date of Summative conference

_____Date Evaluator notified of intent to appeal

*This form shall be presented in person or by mail to any member of the appeals panel within five working days of completion of the summative conference.*

## McCreary County School District
## Corrective Action Plan

Evaluatee: _____ Evaluator: _____

Position: _____ School Year: _____ Implementation Date: _____

| AREA of NEED (Domain and/or Component) | OBJECTIVE / GOAL | Procedures/Activities for achieving objective/goal | Appraisal Method and Target Date | Required periodic checks (at least one every 30 days) *Initial and Date* |
|---|---|---|---|---|
| | | | | Meeting 1: |
| | | | | Meeting 2: |
| | | | | Meeting 3: |
| | | | | Meeting 4: |
| | | | | |
| **AREA of NEED (Domain and/or Component)** | **OBJECTIVE / GOAL** | **Procedures/Activities for achieving objective/goal** | **Appraisal Method and Target Date** | **Required periodic checks (at least one every 30 days) *Initial and Date*** |
| | | | | Meeting 1: |
| | | | | Meeting 2: |
| | | | | Meeting 3: |
| | | | | Meeting 4: |

_____ _____

Evaluatee Evaluator

_____ _____

Date Date