

APPENDIX B-11 FOCUSED EVALUATION REQUEST FORM EMPLOYEE

Evaluation criteria:

- 1) Five (5) years of satisfactory or proficient evaluations
- 2) And at least one (1) comprehensive evaluation every five (5) years

Having met both evaluation criteria and having reviewed the Focused evaluation process,

I, _____, request to participate in a Focused evaluation
(Print name)

option for the _____ school year.

The criterion that I would request for this evaluation is: *(check one)*

- ☐ 1. Centering instruction on high expectations for student achievement.
- ☐ 2. Demonstrating effective teaching practices.
- ☐ 3. Recognizing individual student learning needs and developing strategies to address those needs.
- ☐ 4. Providing clear and intentional focus on subject matter content and curriculum.
- ☐ 5. Fostering and managing a safe, positive learning environment.
- ☐ 6. Using multiple student data elements to modify instruction and improve student learning.
- ☐ 7. Communicating and collaborating with parents and the school community
- ☐ 8. Exhibiting collaborative and collegial practices focused on improving Instructional practice and student learning.

If criteria 1,2,4,5,7 or 8 are chosen, please also choose a student growth criteria below:

_____ *Criterion 3*

_____ *Criterion 6*

Approved: _____

Denied: _____

Explanation of denial:

Principal's signature

Date