Cambridge Public Schools

Home Visitor Evaluation Form

Name:_____ **School:**_____**Grade:**_____**Date:**_____

Rating Key: AA = Above Average A = Average BA = Below Average NA = Not Applicable

I. Commitment to Total Program	AA	A	BA	NA
a. Displays interest and enthusiasm	____	____	____	____
b. Displays evidence of professional growth and development as required for position.	____	____	____	____
c. Willing to put in essential time and effort.	____	____	____	____
d. Is punctual.	____	____	____	____
e. Attends staff meeting regularly.	____	____	____	____
f. Willingly accepts and carries our assignments.	____	____	____	____
g. Performs routine tasks efficiently.	____	____	____	____
h. Completes written reports in timely manner.	____	____	____	____

Comments:

II. Responsiveness to Pupil's Program	AA	A	BA	NA
a. Interacts positively with young children.	____	____	____	____
b. Aware of young children's developmental needs and abilities.	____	____	____	____
c. Displays concern for children's health and safety.	____	____	____	____
d. Appreciates individual differences in young children.	____	____	____	____
e. Displays resourcefulness in helping to provide an enriching experience for young children.	____	____	____	____
f. Encourages children to communicate in many ways.	____	____	____	____
g. Able to implement program curriculum.	____	____	____	____
h. Adapts curriculum to children's individual needs or learning styles.	____	____	____	____

Comments:

III. Interpersonal Relationships	AA	A	BA	NA
a. Is respectful of families' culture and home traditions.	____	____	____	____
b. Is able to communicate program guidelines/expectations.	____	____	____	____
c. Able to establish a rapport with young children.	____	____	____	____
d. Able to establish a rapport with parents/guardians.	____	____	____	____
e. Maintains positive attitude toward others.	____	____	____	____

Comments:

IV. Parent Interaction	AA	A	BA	NA
a. Encourages parent participation.	____	____	____	____
b. Supports parent as child's first teacher.	____	____	____	____
c. Able to explain rationale for program goals.	____	____	____	____
e. Values parents' views and values.	____	____	____	____

Comments:

V. Staff Relationships	AA	A	BA	NA
a. Accepts guidance and suggestions.	____	____	____	____
b. Is a cooperative team member.	____	____	____	____
c. Is a contributing team member.	____	____	____	____

Comments:

_____	_____	_____	_____
Employee Signature	Date	Evaluator Signature	Date

The employee's signature indicates that he/she and the evaluator have discussed the evaluation and does not necessarily indicate agreement with the evaluation.