

Professional Practice Summary Page

Teacher's Name: _____ School Year: _____

School: _____ Evaluator: _____

RATINGS ON INDIVIDUAL RUBRICS:

I. Planning and Preparation for Learning

Highly Effective Effective Improvement Needed Does Not Meet Standards

II. Knowledge of Students

Highly Effective Effective Improvement Needed Does Not Meet Standards

III. Delivery of Instruction

Highly Effective Effective Improvement Needed Does Not Meet Standards

IV. Monitoring, Assessment and Follow-Up

Highly Effective Effective Improvement Needed Does Not Meet Standards

V. Family and Community Outreach

Highly Effective Effective Improvement Needed Does Not Meet Standards

VI. Professional Responsibilities

Highly Effective Effective Improvement Needed Does Not Meet Standards

Circle Overall Rubric Rating:

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

Professional practice overall rating: _____ (1-4)

Student growth measures rating: _____

Overall rating (see matrix): _____

OVERALL COMMENTS BY EVALUATOR:

OVERALL COMMENTS BY TEACHER:

Evaluator's Signature: _____ Date: _____

Teacher's Signature: _____ Date: _____

(The teacher's signature indicates that he or she has seen and discussed the evaluation; it does not necessarily denote agreement with the report.)