INSTRUCTIONAL PERFORMANCE EVALUATION and GROWTH SYSTEM (IPEGS) IMPROVEMENT PLAN (IP)

Professional	Employee #	Date	-
Provide the performance standard that is the focus of the	IP (Only one performance standard per form	ı):	_
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Deficiency(s) Observed:			
Resource(s):			
Activity(s)/Responsible Party(s):			_
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Date Due:			
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Professional's Signature:		Date:	
Site Administrator's Signature:		Date:	
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^{*}Professional's signature signifies receipt and does not necessarily indicate agreement with its contents.

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