



DOCUMENTATION COVER SHEET

TEACHER

Teacher's Name _____ Employee Number _____

Assessor's Name _____ School Year _____

Teacher Directions: Place required items in order behind this cover sheet and staple in the upper left hand corner. Submit the packet to your assessor 10 calendar days prior to the summative evaluation meeting.

Check if
submitted

Required Item

Goal Setting for Learner/Program Progress

Summarize the End-of-Year Data Results here, for the completion of Section VII of the goal setting form. Accompanying data and other evidence of goal progress may be included in the summary and/or attached.

Data Attached

Communication

Provide evidence of how the professional communicates with stakeholders (*e.g., families, staff, faculty, and students*).

Professional Development/Professional Growth Experiences

Provide evidence of the successful completion of professional development that result in the accumulation of Master Plan Points during the evaluation year. Additionally, professionals may provide evidence of other professional growth experiences.