

Leslie Public Schools Teacher Annual Evaluation

Teacher Name: _____ Building/Assignment: _____ Date Hired: _____

Employee Number: _____ Evaluator: _____ School Year: _____

Non-Tenure Year	Tenure Cycle Year	Date of Goal Setting Meeting	Date of Formal Observation	Date of Formal Observation Conferences (if appropriate)	Final Conference Date
Year 1	Year 1	_____ (Date)	1 (Date) (Time/Subject) 2 (Date) (Time/Subject)	1 (Date) 2 (Date)	(Date)
Year 2	Year 2				
Year 3	Year 3	Date of I.D.P. Meeting (if Applicable) _____ (Date)	Evaluator's Observation & Teacher Visitation reports required: - twice for non tenure teachers - once for year 3 tenure teachers	Observation Conferences required each time Evaluator's Observation & Teacher Visitation reports are used	
Year 4					

Goal One: _____ Goal Two: _____	Assessment Method(s): _____ Assessment Method(s): _____
----------------------------------------	----------------------------------------------------------------

Evaluation. Written feedback shall be given in all areas for all non-tenure teachers. Written feedback shall be given for tenure teachers in any area marked "Ineffective," or "Minimally Effective" or in all areas for a tenure teacher on an I.D.P.

If the feedback given in the evaluation is from another administrator, each item shall be cited in the feedback write-up below.

I. Professional Responsibilities (maintains certification, seeks professional development, maintains records, and effectively communicates with parents and students)

- Highly Effective
- Effective
- Minimally Effective
- Ineffective

Feedback: _____

II. Planning and Preparation (demonstrates knowledge of content, student ability, needs, clarity of instruction, appropriate use of available resources)

- Highly Effective
- Effective
- Minimally Effective
- Ineffective

Feedback: _____

