

## **SECTION 6 INDEX**

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## Teacher Evaluation Procedure

Within two (2) weeks after the beginning of each school year, the Director and his/her certified designee shall provide each teacher with a copy of the evaluation procedure. No formal evaluation shall take place until a copy has been given to each teacher. All formal observations shall be conducted with the full knowledge of all parties involved.

Probationary teachers shall be evaluated at least two (2) times during each probationary year. The initial evaluation may occur as early as October 1<sup>st</sup>. There shall be a minimum twenty-five (25) work-day period between the presentation of the evaluation and the initiation of the second evaluation unless otherwise agreed upon.

All tenured teachers will be evaluated in the following manner, based on the teachers most current evaluation:

The **excellent** tenured teacher will have a formal written evaluation a minimum of every (3) years. Goal setting will occur in the other two (2) years. If the teacher so chooses, goals may be written covering a period of one (1) to two (2) years. Excellent tenured teachers may request a formal written evaluation in lieu of goal setting.

The **satisfactory** tenured teacher will be evaluated a minimum of once per school year.

The **unsatisfactory** tenured teacher will be evaluated a minimum of two (2) times per school year.

Each formal written evaluation (formal and supplementary field summary) of a teacher shall be preceded by at least one (1) classroom observation of at least thirty (30) minutes of a class period when students are present.. of a teacher shall be preceded by at least one (1) classroom observation of at least thirty (30) minutes of a class period when students are present. A copy of the written evaluation shall be given to the teacher and a private conference shall be held between the teacher and evaluator within fifteen (15) days following the formal observation unless the parties mutually agree to another date. A copy signed by both parties shall be given to the teacher; a second copy signed by both parties will be retained for the employer.

A change in performance during a goal setting year can generate a formal observation and written evaluation for the tenured teacher. In a teacher's formal evaluation, a supplementary field summary may be used only if mutually agreed upon.

- a. By the teacher and the evaluator during the pre-conference the field summary will be noted on the Cooperative's Evaluation Form.
- b. The teacher and the evaluator must also agree on the personnel to be involved.

If a teacher feels the formal written evaluation is incomplete, inaccurate, or unjust, said teacher may object in writing within fifteen (15) days of the evaluation conference and

have the objection attached to the evaluation report to be placed in the teacher's personnel file.

Evaluation Committee: An evaluation committee composed of the Director or his/her certified designee, the Association president (s), and two (2) local association appointees shall annually review the evaluation plan and make necessary changes. All goal setting and evaluation forms and procedures will follow the criteria set forth by the joint evaluation committee. The Director or his/her certified designee will be available to provide suggestions to improve the quality of teaching.

KENDALL COUNTY SPECIAL EDUCATION COOPERATIVE

TEACHER EVALUATION

Teacher: \_\_\_\_\_ Position: \_\_\_\_\_

Evaluator: \_\_\_\_\_ Position: \_\_\_\_\_

Date of Evaluation: \_\_\_\_\_

Date of Post-Observation Conference: \_\_\_\_\_

An X on the line indicates the rating in each area. In addition to job descriptions and indicators of performance, pre-observations conference, goal setting, informal observations and formal classroom observations will be used when evaluating each area.

**RATINGS**

Excellent: Shall mean consistently meets job requirements and on numerous Occasions exceeds them. Assignments and responsibilities are being accomplished in an effective manner with only general guidance and occasional supervision. This professional employee produces tangible results which always meet normal standards of the job and sometimes exceeds them.

Satisfactory: Shall mean performance meets expectations of the experienced school district employee. Performs all aspects of the description and consistently meets job requirements. Assignments are being accomplished effectively with a minimum amount of supervision and direction. Employee is producing acceptable and tangible results which at least equal the normal standards of the job.

Unsatisfactory: Shall mean the employee is unable to meet job requirements. Performance is well below standards and not acceptable. Requires continual close supervision and direction. Employee is producing inadequate results which require formal remediation.



IV. Classroom Management

\_\_\_\_\_ Excellent  
Unsatisfactory

\_\_\_\_\_ Satisfactory

\_\_\_\_\_

Narrative Comments:

V. Relationships with Students, Parents and Staff

\_\_\_\_\_ Excellent  
\_\_\_\_\_ Unsatisfactory

\_\_\_\_\_ Satisfactory

Narrative Comments:

VI. Professional Responsibilities

\_\_\_\_\_ Excellent

\_\_\_\_\_ Unsatisfactory

\_\_\_\_\_ Satisfactory

Narrative Comments:

VII. Goals Accomplished from the previous school year:

VIII. New Goals for school year:

**Overall Rating:**

\_\_\_\_\_ Excellent  
\_\_\_\_\_ Unsatisfactory

\_\_\_\_\_ Satisfactory

I have read the above evaluation

**Teacher:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Evaluator:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Kendall County Special Education Cooperative  
Review of Goals**

20\_\_ to 20\_\_

Teacher: \_\_\_\_\_ Position: \_\_\_\_\_

Evaluator: \_\_\_\_\_ Position: \_\_\_\_\_

Date: \_\_\_\_\_

The review of goals from the last evaluation and the development of goal(s) to be utilized during the goal setting year should be completed at a conference held in May or September.

Review of Goals for 20\_\_ - 20\_\_:

Goal(s) Setting Year:

New Goal for 20\_\_ - 20\_\_:

Teacher: \_\_\_\_\_ Date: \_\_\_\_\_

Evaluator: \_\_\_\_\_ Date: \_\_\_\_\_

KENDALL COUNTY SPECIAL EDUCATION COOPERATIVE  
GOAL SETTING  
20 \_\_ - 20 \_\_

Teacher: \_\_\_\_\_ Position: \_\_\_\_\_

Evaluator: \_\_\_\_\_ Position: \_\_\_\_\_

Today's Date: \_\_\_\_\_

The review of the goal setting year should be completed during the second semester.  
The Teacher will complete the Teacher Statement of Goal Accomplishments (Page 1).  
The Evaluator shall complete the Supervisor Statement of goal Accomplishments (Page 2).

Goal statement for 20\_\_ to 20 \_\_: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Teacher statement of Goal Accomplishments:

Review checklist:

- |  |                               |
|--|-------------------------------|
| _____ Accomplished                             | _____ In Progress             |
| _____ Incorporated into program                | _____ Lack of Resources       |
| _____ Not appropriate for program<br>evaluated | _____ Insufficient time to be |
| _____ Not meeting student needs                | _____ other: _____            |
| _____ Will be ongoing                          |                               |
| _____ Other: _____                             |                               |

Supervisor Statement of Goal Accomplishments:

New Goal for 20\_\_ to 20\_\_:

Teacher: \_\_\_\_\_

Date: \_\_\_\_\_

Evaluator: \_\_\_\_\_

Date: \_\_\_\_\_

KENDALL COUNTY SPECIAL EDUCATION COOPERATIVE  
SCHOOL SERVICE PERSONNEL FIELD EVALUATION

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Position: \_\_\_\_\_ Evaluator: \_\_\_\_\_

Please put an "X" on the line indicating the rating in each area. Use the enclosed indicators of performance to help with your ratings. Reference to specific items by number will assist in this performance.

**Excellent:** Shall mean consistently meets job requirements and on numerous occasions exceeds them. Assignments and responsibilities are being accomplished in an effective manner with only general guidance and occasional supervision. This professional employee produces tangible results which always meet normal standards of the job and sometimes exceeds them.

**Satisfactory:** Shall mean performance meets expectations of the experienced school district employee. Performs all aspects of the description and consistently meets job requirements. Assignments are being accomplished effectively with a minimum amount of supervision and direction. Employee is producing acceptable and tangible results which at least equal the normal standards of the job.

**Unsatisfactory:** Shall mean the employee is unable to meet job requirements. Performance is well below standards and not acceptable. Requires continual close supervision and direction. Employee is producing inadequate results which require formal remediation.

**1. Services to Students and Parents**

\_\_\_\_\_ Excellent                      \_\_\_\_\_ Satisfactory                      \_\_\_\_\_ Unsatisfactory

Narrative Comments:

**2. Work with School Personnel**

\_\_\_\_\_ Excellent                      \_\_\_\_\_ Satisfactory                      \_\_\_\_\_ Unsatisfactory

Narrative Comments:

**3. Competency in Methods and Practice**

\_\_\_\_\_ Excellent

\_\_\_\_\_ Satisfactory

\_\_\_\_\_ Unsatisfactory

Narrative Comments:

**4. School/Community Relations**

\_\_\_\_\_ Excellent

\_\_\_\_\_ Satisfactory

\_\_\_\_\_ Unsatisfactory

Narrative Comments:

**5. Overall Rating and Recommendation**

\_\_\_\_\_ Excellent

\_\_\_\_\_ Satisfactory

\_\_\_\_\_ Unsatisfactory

Narrative Comments:

\_\_\_\_\_  
Employee's Signature

\_\_\_\_\_  
Evaluator's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

KENDALL COUNTY SPECIAL EDUCATION COOPERATIVE  
SECRETARY EVALUATION

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Position: \_\_\_\_\_ Evaluator: \_\_\_\_\_

Please put an "X" on the line indicating the rating in each area. Use the enclosed indicators of performance to help with your ratings. Reference to specific items by number will assist in this performance.

**Excellent:** Shall mean consistently meets job requirements and on numerous occasions exceeds them. Assignments and responsibilities are being accomplished in an effective manner with only general guidance and occasional supervision. This professional employee produces tangible results which always meet normal standards of the job and sometimes exceeds them.

**Satisfactory:** Shall mean performance meets expectations of the experienced school district employee. Performs all aspects of the description and consistently meets job requirements. Assignments are being accomplished effectively with a minimum amount of supervision and direction. Employee is producing acceptable and tangible results which at least equal the normal standards of the job.

**Unsatisfactory:** Shall mean the employee is unable to meet job requirements. Performance is well below standards and not acceptable. Requires continual close supervision and direction. Employee is producing inadequate results which require formal remediation.

**1. Quality of Work**

\_\_\_\_\_ Excellent                      \_\_\_\_\_ Satisfactory                      \_\_\_\_\_ Unsatisfactory

Narrative Comments:

**2. Work with School Personnel**

\_\_\_\_\_ Excellent                      \_\_\_\_\_ Satisfactory                      \_\_\_\_\_ Unsatisfactory

Narrative Comments:

**3. Communication Skills**

\_\_\_\_\_ Excellent

\_\_\_\_\_ Satisfactory

\_\_\_\_\_ Unsatisfactory

Narrative Comments:

**4. Reliability/Responsibility**

\_\_\_\_\_ Excellent

\_\_\_\_\_ Satisfactory

\_\_\_\_\_ Unsatisfactory

Narrative Comments:

**5. Initiative**

\_\_\_\_\_ Excellent

\_\_\_\_\_ Satisfactory

\_\_\_\_\_ Unsatisfactory

Narrative Comments:

**6. Overall Rating and Recommendations**

\_\_\_\_\_ Excellent

\_\_\_\_\_ Satisfactory

\_\_\_\_\_ Unsatisfactory

Narrative Comments:

\_\_\_\_\_  
Employee's Signature

\_\_\_\_\_  
Evaluator's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

KENDALL COUNTY SPECIAL EDUCATION COOPERATIVE  
COORDINATOR EVALUATION

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Position: \_\_\_\_\_ Evaluator: \_\_\_\_\_

Please put an "X" on the line indicating the rating in each area. Use the enclosed indicators of performance to help with your ratings. Reference to specific items by number will assist in this performance.

**Excellent:** Shall mean consistently meets job requirements and on numerous occasions exceeds them. Assignments and responsibilities are being accomplished in an effective manner with only general guidance and occasional supervision. This professional employee produces tangible results which always meet normal standards of the job and sometimes exceeds them.

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**1. Administration**

\_\_\_\_\_ Excellent                      \_\_\_\_\_ Satisfactory                      \_\_\_\_\_ Unsatisfactory

Narrative Comments:

**2. Supervision**

\_\_\_\_\_ Excellent                      \_\_\_\_\_ Satisfactory                      \_\_\_\_\_ Unsatisfactory

Narrative Comments:

**3. Inservice**

\_\_\_\_\_ Excellent

\_\_\_\_\_ Satisfactory

\_\_\_\_\_ Unsatisfactory

Narrative Comments:

**4. Communication**

\_\_\_\_\_ Excellent

\_\_\_\_\_ Satisfactory

\_\_\_\_\_ Unsatisfactory

Narrative Comments:

**5. Overall Rating and Recommendation**

\_\_\_\_\_ Excellent

\_\_\_\_\_ Satisfactory

\_\_\_\_\_ Unsatisfactory

Narrative Comments:

\_\_\_\_\_  
Employee's Signature

\_\_\_\_\_  
Evaluator's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

KENDALL COUNTY SPECIAL EDUCATION COOPERATIVE  
EDUCATIONAL SUPPORT PERSONNEL EVALUATION

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Position: \_\_\_\_\_ Evaluator: \_\_\_\_\_

Please put an "X" on the line indicating the rating in each area. Use the enclosed indicators of performance to help with your ratings. Reference to specific items by number will assist in this performance.

**Excellent:** Shall mean consistently meets job requirements and on numerous occasions exceeds them. Assignments and responsibilities are being accomplished in an effective manner with only general guidance and occasional supervision. This professional employee produces tangible results which always meet normal standards of the job and sometimes exceeds them.

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**Unsatisfactory:** Shall mean the employee is unable to meet job requirements. Performance is well below standards and not acceptable. Requires continual close supervision and direction. Employee is producing inadequate results which require formal remediation.

**1. Quality of Work**

\_\_\_\_\_ Excellent                      \_\_\_\_\_ Satisfactory                      \_\_\_\_\_ Unsatisfactory

Narrative Comments:

**2. Quantity of Work**

\_\_\_\_\_ Excellent                      \_\_\_\_\_ Satisfactory                      \_\_\_\_\_ Unsatisfactory

Narrative Comments:

**3. Communication Skills**

\_\_\_\_\_ Excellent

\_\_\_\_\_ Satisfactory

\_\_\_\_\_ Unsatisfactory

Narrative Comments:

**4. Reliability/Responsibility**

\_\_\_\_\_ Excellent

\_\_\_\_\_ Satisfactory

\_\_\_\_\_ Unsatisfactory

Narrative Comments:

**5. Initiative**

\_\_\_\_\_ Excellent

\_\_\_\_\_ Satisfactory

\_\_\_\_\_ Unsatisfactory

Narrative Comments:

## 6. Overall Rating and Recommendations

\_\_\_\_\_ Excellent

\_\_\_\_\_ Satisfactory

\_\_\_\_\_ Unsatisfactory

Narrative Comments:

\_\_\_\_\_  
Employee's Signature

\_\_\_\_\_  
Evaluator's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date