

TEACHER EVALUATION COVER SHEET

SCHOOL YEAR

Teacher's Legal Name _____
(No Nicknames, please)

School/Location: _____

Grade/Subject Area: _____

Hire Date (as shown on attendance reports): _____

Observation Dates: _____

TYPE OF EVALUATION	DOMAINS (please check all that apply)
Novice/Induction <input type="checkbox"/> 1 st Year	Domain 1 Domain 2 Domain 3 Domain 4 Domain 5
Professional <input type="checkbox"/> Major <input type="checkbox"/> Minor 1 <input type="checkbox"/> Minor 2	Domain 1 Domain 2 Domain 3 Domain 4 Domain 5
	Domain 1 Domain 2 Domain 3 Domain 4 Domain 5
	Domain 1 Domain 2 Domain 3 Domain 4 Domain 5
Focused Assistance <input type="checkbox"/> Major	Domain 1 Domain 2 Domain 3 Domain 4 Domain 5

Please check the appropriate date for this evaluation:					
Novice/Induction	<input type="checkbox"/> December 1 <input type="checkbox"/> February 15 <input type="checkbox"/> April 1 (please check one of the boxes below)				
Professional	<table border="0" style="width: 100%;"> <tr> <td style="width: 60%;">This teacher is recommended for:</td> <td><input type="checkbox"/> Professional Track</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Focused Assistance</td> </tr> </table>	This teacher is recommended for:	<input type="checkbox"/> Professional Track		<input type="checkbox"/> Focused Assistance
This teacher is recommended for:	<input type="checkbox"/> Professional Track				
	<input type="checkbox"/> Focused Assistance				
Focused Assistance	<input type="checkbox"/> April 1				

THE OVERALL PERFORMANCE OF THIS TEACHER FOR THIS EVALUATION PERIOD IS: (Please check one)	<input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory
---	--

Evaluator's Name (Please Print): _____

Evaluator's Signature: _____

Date: _____

Teacher's Signature: _____

Date: _____

Teacher's Comments: Attached To Follow None