

Teacher Evaluation

Teacher: Amber Clark Teaching Assignment: English

Date: Nov. 5 Time: _____ Class Observed English

Evaluator: Hammond

Position: MS Principal

- A formal written evaluation is to be completed by October 15.
- Each evaluation will be based upon professional conversation and classroom evaluation.
- Formal classroom evaluation will be based upon at least 2-3 classroom observation 20-30 minutes in length.
- A written narrative as well as a checklist (provided) will be part of the professional file.
- Teachers may view this file upon request.

The following will be observed and included in the narrative:

Classroom & Instruction

1. Classroom management.
2. Classroom environment, i.e., posters, evidence of student work, etc.
3. Evidence of student grouping.
4. Evidence of class participation.
5. Evidence of teacher preparedness.
6. Attention to supervision outside the class.
 - a. Presence in hallways
 - b. presence at duty assignments
 - c. ability to lead students to positive behaviors.
7. Your recommendation to rehire.

Professionalism

1. What subject or grade does this person teach best?
2. What are areas of strengths?
3. What are areas in need of improvement?
4. Reaction to constructive criticism?
8. Reaction to decisions they did not like?
9. Extra-curricular participation.
5. Influence on school moral:

Positive 1 2 3 4 5 6 7 8 9 10 Negative

6. Would you re-employ?

Yes

No

Teacher Evaluation

7. 1=Outstanding 2= Above Average 3= Average 4=Average 5= Unsatisfactory

Checked Boxes Indicate Selection

	1	2	3	4	5
Effectiveness in classroom	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Classroom Management	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Relation with students	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Relation with peers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interest in the school	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Teacher Signature Amber Carl Date: Nov 6 2019

Supervisor Signature Michi Hammond Date: Nov. 6, 2019