

PERFORMANCE APPRAISAL ANNUAL SUMMATIVE RATING SY

Annual summative form used for provisional and professional gifted education teachers.

Program Area: Gifted Education Teacher

DISTRICT:

SCHOOL:

EDUCATOR'S NAME:

SOCIAL SECURITY NUMBER:

CHECK LEVEL:

Provisional Year 1

Provisional Year 2

PGP Year 1

PGP Year 2

PGP Year 3

CURRENT SUBJECT/GRADE LEVEL: /

SUPERVISOR'S NAME:

CONFERENCE DATES: , , , ,

	Professional Performance Elements	Meets	Does not meet
1.	School Wide Program Responsibilities (Critical)		
2.	Service Delivery (Critical)		
3.	Collaboration and Resource (Critical)		
4.	Promoting Diversity and Equity (Critical)		
5.			
6.			

FINAL ANNUAL RATING (check one):

Acceptable

Unacceptable

SIGNATURE OF EDUCATOR:

DATE:

SIGNATURE OF EVALUATOR:

DATE:

Comments: