



# ST. HELENA PARISH SCHOOL DISTRICT

*A Relentless Pursuit of Excellence*

## Personnel Evaluation Information/Timeline 2015 - 2016 School Year

### **Due by Friday, August 31, 2018**

1. Employee Job Descriptions (must include both principal and employee signature)
2. All employees must sign and date the **JOB DESCRIPTION VERIFICATION FORM**
3. Every employee must sign and date the **PERSONNEL ACCOUNTABILITY INITIAL CONFERENCE FORM**
4. Every teacher must sign the **EVALUATION ROSTER**
5. Every teacher must complete TWO Student Learning Targets (SLTs).
6. Professional Growth Plans must be submitted by all School Leadership Team Members.

### **Classroom Observations**

1. All teachers will be formally observed at least twice in one year. One will be completed in the fall and the other in the spring. One or both observations are completed by the principal. One may be completed by a certified evaluator. If necessary, a third observation will be completed by an external observer.
2. The first Formal Classroom Observation must be completed by December 14, 2018.
3. The Progress on Professional Growth Plan Form for School Leadership Team members must be completed by December 14, 2018.
4. Informal Observations will be completed to provide a preponderance of evidence for the Formal Evaluator. All personnel completing Informal Observations will be certified evaluators.

### **Begin by April 19<sup>th</sup> and conclude by May 3<sup>rd</sup>**

1. Final Professional Growth Plan Progress/Completion Form for administrators.
2. Teacher Self-Evaluation Form.
3. Completed SLT Goal Sheets with Accurate Data.
4. Evaluation Form for each teacher completed by School Principal.

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#### **District Vision:**

*To develop a productive educational system that increases student achievement, develops educator effectiveness, and builds public confidence.*



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**JOB DESCRIPTION VERIFICATION FORM**

My signature below indicates that I have signed and received a copy of my job description for the 2018-2019 school year.

Employee's Name	Employee's Signature

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## PERSONNEL ACCOUNTABILITY INITIAL CONFERENCE FORM

My signature below indicates that I participated in the Personnel Accountability Conference and I have been informed of the Employee Observation and Evaluation process and procedures.

Name	Signature

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## EVALUATION ROSTER

My signature below indicates that I am aware that my performance will be evaluated at the end of the school year.

Name	Signature

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