

Appendix D: Teacher- Summative Evaluation Form

HARLAN COUNTY SCHOOLS TEACHER
Summative Evaluation

Directions: This form is completed by the primary evaluator. A teacher’s Overall Performance Category Rating is based upon a combination of a teacher’s Professional Practice Rating and the Student Growth Rating. Complete each step using the provided matrixes for reference.

Teacher: Click here to enter text.

School Year: Click here to enter text.

School: Click here to enter text.

Professional Practice Rating : Assign a rating to each domain comments may also be included

Measure 1: Planning and Preparation

Choose a rating

Measure 2: Classroom Environment

Choose a rating

Measure 3: Instruction

Choose a rating

Measure 4: Professional Responsibility

Choose a rating

Using the decision matrix: ***Choose an Overall Professional Practice Rating***

Overall Summative Rating: _____

Evaluator Comments _____

Evaluator’s Name _____ Teacher’s Name _____

Evaluator’s Signature _____ Teacher’s Signature _____

(Signature denotes receipt of the summative evaluation, not agreement necessarily with the contents of the form.)

Date _____

Date _____

The evaluatee has five days from receipt of the summative evaluation to request that a rebuttal/explanation be attached to the summative evaluation and/or to file a written appeal with the district Superintendent.