

## Preschool For All Program Evaluation TEACHER SELF EVALUATION

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Self-evaluation has been proven to help set personal goals, and increase teacher performance. This form is for you and will not be used toward your official teacher observation and evaluation, but instead will be used to help plan staff development activities. Evaluate your performance by using the following scale:

**W** = I'm working on it      **S** = I do it sometimes      **M** = I do it most of the time      **A** = I do it always

### Educational Program:

\_\_\_\_\_ I am knowledgeable about the Early Learning Standards and how to align my classroom curriculum to them.

\_\_\_\_\_ I am knowledgeable about developmentally appropriate activities and theories on Early Learning, and my lesson plans incorporate such theories and activities.

\_\_\_\_\_ I provide appropriate learning centers, including a reading center and writing materials that encourage early literacy.

\_\_\_\_\_ I follow a daily routine.

\_\_\_\_\_ My classroom routine provides for a balance of activities, including quiet times, guided activities, small group and large group activities, and at least 60 minutes of free choice time.

\_\_\_\_\_ Activities I choose reflect the interests of the children in my class.

\_\_\_\_\_ Children in my class are encouraged to talk about what they are doing and I comment specifically on their work.

\_\_\_\_\_ I am sensitive to and responsive to children's needs as they arise, both academic and personal.

\_\_\_\_\_ I use effective classroom management skills, by guiding appropriate behavior and using appropriate language.

\_\_\_\_\_ I am knowledgeable about the needs and goals of the children in my class with IEPs.

\_\_\_\_\_ I make adaptations and accommodations to allow and encourage children with IEPs to participate in all learning opportunities and activities.

### Assessment:

\_\_\_\_\_ I regularly assess the progress of each of the students in my class by using work samples, photos, and anecdotal notes.

\_\_\_\_\_ My assessment notes and papers reflect the ongoing life of the classroom and typical activities of the children.

\_\_\_\_\_ I am knowledgeable of the Work Sampling System and effectively use it to report student progress.

\_\_\_\_\_ I am affective at sharing progress with parents and families of my students.

(Over)

**Environment:**

- \_\_\_\_\_ I greet each family and child in a pleasant manner at the beginning of each day.
- \_\_\_\_\_ I do not have a lot of teacher made items on the walls.
- \_\_\_\_\_ I display children's work at the child's eye level.
- \_\_\_\_\_ The Illinois Early Learning Standards are displayed in my classroom.
- \_\_\_\_\_ The daily schedule is posted in my classroom.
- \_\_\_\_\_ The learning centers in my classroom are clearly defined and labeled.
- \_\_\_\_\_ The classroom materials are systematically arranged, labeled, and easily accessible to children.
- \_\_\_\_\_ I have multicultural material that are integrated naturally into my classroom
- \_\_\_\_\_ I promote a positive atmosphere, where all children are accepted and included.

**Professional:**

- \_\_\_\_\_ I arrive on time and finish the day at the appropriate time.
- \_\_\_\_\_ I am conscientious of my attendance and my use of sick leave.
- \_\_\_\_\_ I understand the Little Stars Pre-K philosophy and can share it with parents and the community.
- \_\_\_\_\_ I am willing to participate in Pre-K activities outside my regular hours.
- \_\_\_\_\_ I accept suggestions and criticism from my co-workers gracefully.
- \_\_\_\_\_ I am willing to share my ideas and plans so that I can contribute to the total program.
- \_\_\_\_\_ I assume my share of joint responsibilities.
- \_\_\_\_\_ I maintain confidentiality toward staff members, families, and students.
- \_\_\_\_\_ I make an effort to be sensitive to the needs of the parents and families, and make sure they feel welcome in my classroom.
- \_\_\_\_\_ I strive and make efforts to become more knowledgeable in my field.

\_\_\_\_\_ **On a scale of 1-5, with 1 being poor, and 5 being exceptional, this is how I rate the effectiveness of my job performance.**

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**Preschool For All Program Evaluation  
INDIVIDUAL PROFESSIONAL DEVELOPMENT PLAN**

Name: \_\_\_\_\_

Position: \_\_\_\_\_

Completed for School Year

20\_\_\_\_/20\_\_\_\_.

List 1-3 areas about which you would like to learn more (keeping in mind the district goals):

1. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
3. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What are some activities that you could do to gain the knowledge you are seeking?

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

How will you know when you have gained the knowledge you were seeking?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Submitted by: \_\_\_\_\_

Signature

Date: \_\_\_\_\_

Received by Supervisor: \_\_\_\_\_

Signature

Date: \_\_\_\_\_

## Preschool For All Program Evaluation PARENT SURVEY

We want your true and honest response. Please feel free to return this survey to the Program Director or mail it to the school. If you feel comfortable returning it to school with your child, you may do that as well.

**Direction:** Please read the following questions and circle YES, NO, or Not Applicable (N/A) based on your experience. If you would like to add comments, please do so in the space provided.

**Teacher:** \_\_\_\_\_ **AM Class** **PM Class** **Date:** \_\_\_\_\_

### The teacher...

- |  |     |    |     |
|--|-----|----|-----|
| 1. Was easy to contact, and answered phone and written messages promptly.<br>Comments: | YES | NO | N/A |
| 2. Made me feel comfortable and welcome.<br>Comments:                                  | YES | NO | N/A |
| 3. Communicated with me about my child's needs.<br>Comments:                           | YES | NO | N/A |
| 4. Gave me regular feedback regarding my child's progress.<br>Comments:                | YES | NO | N/A |
| 5. Made me feel welcome to ask questions.<br>Comments:                                 | YES | NO | N/A |
| 6. Listened to my concerns.<br>Comments:   | YES | NO | N/A |
| 7. Was helpful in providing suggestions to help my child.<br>Comments:                 | YES | NO | N/A |

(OVER)

8. Communicated clearly the expectations of my child and my role in supporting my child's educational needs.  
 Comments: YES NO N/A
9. Kept me informed of what was going on in the classroom.  
 Comments: YES NO N/A
10. Invited me to participate either by attending a family fun activity, field trip, party, or to volunteer my time.  
 Comments: YES NO N/A

**The Program...**

1. Held an orientation which allowed my child and me to become familiar with the teacher, classroom, and program information.  
 Comments: YES NO N/A
2. Provided a handbook which gave information about the school and program rules and procedures.  
 Comments: YES NO N/A
3. Used the handbook to explain the program's curriculum and how my child's progress would be assessed.  
 Comments: YES NO N/A

What would you say this Preschool For All program has done or is doing well?

Do you have any suggesting for improving the program?

Overall, I would recommend this Preschool For All program to families with preschool aged children.  
 YES NO

**Thank you for your time and input!  
 Your responses will help us become a better program.**