

# PROFESSIONAL EDUCATION PERSONNEL EVALUATION PROGRAM

## PROFESSIONAL DEVELOPMENT PLAN

ADMINISTRATOR: \_\_\_\_\_ POSITION: \_\_\_\_\_ EVALUATOR: \_\_\_\_\_ DATE: \_\_\_\_\_

**DIRECTIONS:** This plan should be developed from the administrator's evaluation results and should also address student achievement/program improvement goals. Since this form has space for only two areas identified for improvement, you will need to make copies of this form for additional areas identified. Personal/Professional goals may be included but after addressing needs relating to the knowledge/skill areas and student achievement/program improvement. List areas identified for the focus of a Professional Development Plan for the next school year/cycle.

AREA DESIGNATION	PROFESSIONAL DEVELOPMENT RELATED GOALS/OBJECTIVES	PROPOSED ACTIVITIES	TIME LINE	ASSESSMENT METHOD(S)	PROGRESS CHECK DATES		
					1	2	3
Knowledge/ Skill Area:							

**END OF CYCLE ASSESSMENT AND BENEFITS**

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Evaluator Comments

AREA DESIGNATION	PROFESSIONAL DEVELOPMENT RELATED GOALS/OBJECTIVES	PROPOSED ACTIVITIES	TIME LINE	ASSESSMENT METHOD(S)	PROGRESS CHECK DATES		
					1	2	3
<b>Knowledge/Skill Area</b>  --- <b>Or check if:</b> <input type="checkbox"/> Student Achievement/Development or Program Improvement  <input type="checkbox"/> Personal/Professional							

**END OF CYCLE ASSESSMENT AND BENEFITS**

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 Evaluator Comments

We agree upon the Goals/Objectives, Activities, Timelines, and Assessment Method(s) listed:    Administrator: \_\_\_\_\_ Date: \_\_\_\_\_    Evaluator: \_\_\_\_\_ Date: \_\_\_\_\_

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 Signatures indicate we have discussed the Assessment and Benefits described:    Administrator: \_\_\_\_\_ Date: \_\_\_\_\_    Evaluator: \_\_\_\_\_ Date: \_\_\_\_\_