**Appendix N - Gadsden County Annual Evaluation Report for**

**Category II Personnel: 4 or More Years of Service**

***Instructional Practice and Student Performance Scores (VAM)***

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| **Teacher:** |  |  | **Years of Service:** |  |
| **School:** |  |  | **Current Assignment:** |  |
|  |  |  |  |  |
| **Evaluator:** |  | **Date:** |

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| This form serves as a permanent record of an administrator’s evaluation of a teacher’s performance during a specific period based on specific criteria as it relates to the individual’s **instructional practice and student performance scores (VAM)**  using the Art and Science of Teaching Framework.  **Directions:** Complete each of the sections (1-3) by assigning a rating of the teacher’s performance; sign the form and obtain the signature of the teacher. | | | | |
| 1. **Status Score** | | | | |
| The teacher’s status score reflects his/her overall understanding and application of the Four Marzano Teacher Evaluation Domains: Domain 1: Classroom Strategies and Behaviors; Domain 2: Planning and Preparing; Domain 3: Reflecting on Teaching; and Domain 4: Collegiality and Professionalism.  **Directions:** Use may use **Appendix Q-Category II Status Score Worksheet** to compute the teacher’s overall status score. You will need to obtain data for each of the Four Domains in order to compute a weighted overall score. Reference the Overall Status Score number in the cell highlighted in **green** in the spreadsheet. | | | | |
| **Domain 1 Sources of Evidence** (select all that apply)**:**  ❒ Formal Observation  ❒ Informal, Announced Observation  ❒ Informal Unannounced Observation  ❒ Walkthrough  ❒ Artifacts:  ❒ Other:  **Domain 2 Sources of Evidence** (select all that apply)**:**  ❒ Planning (Pre) Conference  ❒ Artifacts:  ❒ Other:  **Domain 3 Sources of Evidence** (select all that apply)**:**  ❒ Self-Assessment  ❒ Reflection (Post) Conference  ❒ Professional Growth Plan  ❒ Artifacts:  ❒ Other:  **Domain 4 Sources of Evidence** (select all that apply)**:**  ❒ Conferences  ❒ Discussions  ❒ Artifacts:  ❒ Other: | | **Evaluator Comments:** | | |
| **❒ HIGHLY EFFECTIVE (4)** | ❒ **EFFECTIVE (3)** | | ❒ **NEEDS IMPROVING/DEVELOPING (2)** | ❒**UNSATISFACTORY (1)** |
| Overall Status Score of  3.5 – 4.0 | Overall Status Score of  2.5 – 3.4 | | Overall Status Score of  1.5 – 2.4 | Overall Status Score of  1.0 – 1.4 |

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| 1. **Deliberate Practice Plan or Individual Professional Development Plan (IPDP) Score** | | | |
| The deliberate practice or individual professional development plan score reflects 5% of the teacher’s overall instructional practice calculation. The combined weight of the two scores is 50%. See **Table 9: Deliberate Practice Cut Scores** for rubric.  **Directions:** Use the rubric in **Table 9** to indicate the teacher’s deliberate practice score (IPDP). Scores will range from 1 to 4. | | | |
| **Evaluator Comments:** | | | |
| ❒ **HIGHLY EFFECTIVE (4)** | ❒ **EFFECTIVE (3)** | ❒ **NEEDS IMPROVING/**  **DEVELOPING (2)** | ❒ **UNSATISFACTORY (1)** |
| Overall Final Score of  4.0 | Overall Final Score of  3.0 | Overall Final Score of  2.0 | Overall Final Score of  1.0 |

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| **3. Final Score** | | | |
| The final score consists of the status score, deliberate practice score (IPDP), and student performance score (VAM) combined. See **Appendices R, S, or T**-**Summative Evaluation for Classroom and Non-Classroom Teachers** for calculation instructions. | | | |
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| ❒ **HIGHLY EFFECTIVE (4)** | ❒ **EFFECTIVE (3)** | ❒ **NEEDS IMPROVING/**  **DEVELOPING (2)** | ❒ **UNSATISFACTORY (1)** |
| Overall Final Score of  3.5 – 4.0 | Overall Final Score of  2.5 – 3.4 | Overall Final Score of  1.5 – 2.4 | Overall Final Score of  1.0 – 1.4 |
| **Evaluator Comments:** | | | |

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| **4. Signatures** | |
| **Evaluator:** I certify that this evaluation reflects the evaluatee instructional and student performance. | |
| Signature:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Date:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | |
| **Evaluatee:** I acknowledge the receipt of this Annual Evaluation Form. | |
| Signature:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Date:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Comments: | |

2