**FORM A**

**Initial Evaluation and Development Plan**

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| **Name:** |  | **Date:** |  |
| **School/Position:** |  |

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| **STUDENT GROWTH INDICATORS** |
| **Student Learning Objectives** |
| Write each SLO and identify what professional learning and/or other type of support would help you to achieve your goals. |
| **SLO 1** |  |
| **SLO 2** |  |

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| **Focus Area Performance Expectation Element(s):** |
| **Possible Action Step(s)** |
| **Identify what professional learning and/or other type of support would help you to achieve your goals.** |

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| **Survey Target:** |
| **Possible Action Step(s)** |

**Evaluator Comments:**

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| **Administrator:** |  | **Date:** |  |
|  |  |  |  |
| **Evaluator:** |  | **Date:** |  |
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