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| Educator Name: | Click here to enter text. | | | | | | | | | | | | | | | | | |
| Subjects(s): | Click here to enter text. | | | | | | Grade Level(s): | | | | Click here to enter text. | | | | | | | |
| Administrator Name: | | Click here to enter text. | | | | | School/Location: | | | | Click here to enter text. | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| First Formal Observation Date(s) | | | | | |  | | Informal Observation Date(s) (10 minutes per observation) | | | | | | | | | | |
| First Pre-Observation: | | | | | Click here to enter a date. |  | | Date Observed: | | | Click here to enter a date. | | | | | | | |
| First Observation (30 minutes): | | | | | Click here to enter a date. |  | | Date Observed: | | | Click here to enter a date. | | | | | | | |
| First Post-Observation: | | | | | Click here to enter a date. |  | |  | | | | | | | | | | |
|  | | | | |  |  | |  | | | | | | | | | | |
| If non-tenured: Second Formal Observation Date(s) | | | | | |  | |  | | | | | | | | | | |
| Second Pre-Observation: | | | | | Click here to enter a date. |  | | Date Observed: | | | | Click here to enter a date. | | | | | | |
| Second Observation (30 minutes): | | | | | Click here to enter a date. |  | | Date Observed: | | | | Click here to enter a date. | | | | | | |
| Second Post Observation: | | | | | Click here to enter a date. |  | |  | | | |  | | | | | | |
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| **Domain 1: Planning and Preparation** | | | | | | | | | OVERALL PROFICIENT: DOMAIN 1 | | | | | | | | |  |
| Component 1a: *Demonstrating knowledge and skill in speech language pathology* | | | | | | | | | | UNSAT | | | | | BASIC | | PROF | EXPL |
| Knowledge of content and the structure of the discipline | | | | | | | | | |  | | | | |  | |  |  |
| Knowledge of prerequisite relationships | | | | | | | | | |  | | | | |  | |  |  |
| Component 1e: *Planning the therapy program, integrated with the regular school program, to meet the needs of individual students* | | | | | | | | | | UNSAT | | | | | BASIC | | PROF | EXPL |
| Therapy activities connected to general curriculum | | | | | | | | | |  | | | | |  | |  |  |
| Therapy session structure | | | | | | | | | |  | | | | |  | |  |  |
| Component 1f: *Developing a plan to evaluate the students’ therapy program* | | | | | | | | | | UNSAT | | | | | BASIC | | PROF | EXPL |
| Goals and Objectives | | | | | | | | | |  | | | | |  | |  |  |
| Design of formative assessments | | | | | | | | | |  | | | | |  | |  |  |
| Progress data collected and used for planning | | | | | | | | | |  | | | | |  | |  |  |
| Evidence for Domain 1: | | | | | | | | | | | | | | | | | | |
| **Domain 2: The Environment** | | | | | | | | | OVERALL PROFICIENT: DOMAIN 2 | | | | | | | | |  |
| Component 2b: *Organizing time efficiently* | | | | | | | | | | UNSAT | | | | BASIC | | | PROF | EXPL |
| Maintaining special education timelines | | | | | | | | | |  | | | |  | | |  |  |
| Managing transitions | | | | | | | | | |  | | | |  | | |  |  |
| Supervision of paraprofessionals | | | | | | | | | |  | | | |  | | |  |  |
| Component 2e: *Organizing physical space for testing of students and providing therapy* | | | | | | | | | | UNSAT | | | | BASIC | | | PROF | EXPL |
| Safety and accessibility | | | | | | | | | |  | | | |  | | |  |  |
| Use of shared space | | | | | | | | | |  | | | |  | | |  |  |
| Management of supplies and materials | | | | | | | | | |  | | | |  | | |  |  |
| Evidence for Domain 2: | | | | | | | | | | | | | | | | | | |
| **Domain 3: Delivery of Service** | | | | | | | | | OVERALL PROFICIENT: DOMAIN 3 | | | | | | | | |  |
| Component 3a: *Responding to referrals and evaluating student needs* | | | | | | | | | | UNSAT | | | | BASIC | | | PROF | EXPL |
| Selection of assessment materials | | | | | | | | | |  | | | |  | | |  |  |
| Administration of assessments | | | | | | | | | |  | | | |  | | |  |  |
| Interpretation of assessments | | | | | | | | | |  | | | |  | | |  |  |
| Use of assessments to determine plan | | | | | | | | | |  | | | |  | | |  |  |
| Component 3b: *Developing and implementing treatment plans to maximize students’ success* | | | | | | | | | | UNSAT | | | | BASIC | | | PROF | EXPL |
| Activities and assignments | | | | | | | | | |  | | | |  | | |  |  |
| Instructional materials and resources | | | | | | | | | |  | | | |  | | |  |  |
| Component 3c: *Communicating with families* | | | | | | | | | | UNSAT | | | | BASIC | | | PROF | EXPL |
| IEP Meetings | | | | | | | | | |  | | | |  | | |  |  |
| Disability information | | | | | | | | | |  | | | |  | | |  |  |
| Communication concerning progress | | | | | | | | | |  | | | |  | | |  |  |
| Evidence for Domain 3: | | | | | | | | | | | | | | | | | | |
| **Domain 4: Professional Responsibilities** | | | | | | | | | OVERALL PROFICIENT: DOMAIN 4 | | | | | | | | |  |
| Component 4c: *Maintaining an effective data management system* | | | | | | | | | | UNSAT | | | | BASIC | | | PROF | EXPL |
| Student progress on goals and objectives | | | | | | | | | |  | | | |  | | |  |  |
| Attendance and non-instructional records | | | | | | | | | |  | | | |  | | |  |  |
| Medicaid Billing and Reporting (if applicable) | | | | | | | | | |  | | | |  | | |  |  |
| Component 4f: *Showing professionalism, including integrity, advocacy, and maintaining confidentiality* | | | | | | | | | | UNSAT | | | | BASIC | | | PROF | EXPL |
| Integrity and ethical conduct | | | | | | | | | |  | | | |  | | |  |  |
| Service to students | | | | | | | | | |  | | | |  | | |  |  |
| Decision making | | | | | | | | | |  | | | |  | | |  |  |
| Evidence for Domain 4: | | | | | | | | | | | | | | | | | | |
| **Statement**: *A formal conference was held on* Click here to enter a date. *with my evaluator. I understand that I have five work days to study and prepare a response which will be attached to this evaluation prior to being sent to Human Resources. My response will become a part of this evaluation. I also understand that my signature below does not necessarily mean that I agree with the evaluation.* | | | | | | | | | | | | | | | | | | |
| Administrator’s signature: | | | |  | | | | | | | | | Date: | | |  | | |
| Educator’s signature: | | |  | | | | | | | | | | Date: | | |  | | |