



SUMMATIVE EVALUATION FOR HOME HOSPITAL INSTRUCTOR

Non-Tenured _____ Tenured _____ Date _____

Evaluatee _____ Grade / Content Area _____

Evaluator _____ Position _____

School _____

Teacher Standards

Meets

Does not Meet

1. Implements Curriculum/Plans Instruction
2. Organizes Learning Environment/Climate
3. Presents Instruction/Guides Learning
4. Assesses Learning/Instruction
5. Manages Student Behavior
6. Communicates Effectively
7. Exhibits Professionalism
8. Meets Job Expectations/Descriptions
9. Demonstrates Implementation of Technology

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Individual professional growth plan reflects a desire/need to acquire further knowledge/skills in the standard number(s) checked below:

1____ 2____ 3____ 4____ 5____ 6____ 7____ 8____ 9____

Evaluatee's comments: _____

Evaluator's comments: _____

To be signed after all information above has been completed and discussed:

Evaluatee: Agree with this summative evaluation

Disagree with this summative evaluation

Evaluatee's Signature

Date

Evaluatee shall be given the opportunity to attach a written response to the summative evaluation.

Opportunities for appeal process at both the local and state levels are a part of the Floyd County Certified School Personnel Evaluation Plan.

Any rating in the "does not meet" column requires the development of an Individual Corrective Action Plan.

Employment Recommendation to Superintendent

Recommends for re-employment

Does not recommend for re-employment

Evaluator's Signature

Date