

Primary Evaluator—Name/Title: _____

Supervising Evaluator, if any—Name/Title/Role in evaluation: _____

School(s): _____

Check all that apply¹: Proposed Goals Final Goals Date: _____

A minimum of one student learning goal and one professional practice goal are required. **Team goals must be considered** per [603 CMR 35.06\(3\)\(b\)](#). Attach pages as needed for additional goals or revisions made to proposed goals during the development of the Educator Plan.

Student Learning SMART Goal <i>Check whether goal is individual or team; write team name if applicable.</i>	Professional Practice SMART Goal <i>Check whether goal is individual or team; write team name if applicable.</i>
<input type="checkbox"/> Individual <input type="checkbox"/> Team: _____	<input type="checkbox"/> Individual <input checked="" type="checkbox"/> X Team: : ELEMENTARY – COMPREHENSIVE HEALTH (PHYSICAL EDUCATION) – Grades 3 - 5 - <u>Common Core – Literacy – Speaking and Listening, pp. 31- 32</u> I will be able to give an explanation to colleagues on how I am incorporating the Common Core Speaking and Listening standard, (Comprehension and Collaboration), for grades 3 - 5 in the curriculum area of comprehensive health. I will implement into my lessons, on a weekly basis, collaborative conversations with diverse partners with peers and adults in small and larger groups on <i>grade appropriate topics</i> derived from the Curriculum Framework Standards for Comprehensive Health as applicable to grades 3- 5. Evidence gathered by the evaluator and/or teacher: <ul style="list-style-type: none"> • Plan book with lessons that incorporate these practices highlighted • Short observations • Student work/partner, small and large group discussions • Teacher made assessment • Meeting between teacher and evaluator

¹ If proposed goals change during Plan Development, edits may be recorded directly on original sheet or revised goal may be recorded on a new sheet. If proposed goals are approved as written, a separate sheet is not required.

Educator Plan Form

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SMART: S=Specific and Strategic; M=Measurable; A=Action Oriented;
R=Rigorous, Realistic, and Results-Focused; T=Timed and Tracked

Educator—Name/Title: _____

Primary Evaluator—Name/Title: _____

Supervising Evaluator, if any—Name/Title/Role in evaluation: _____

School(s): _____

Educator Plan: Self-Directed Growth Plan Directed Growth Plan
 Developing Educator Plan Improvement Plan*

Plan Duration: 2-Year One-Year Less than a year _____

Start Date: _____ End Date: _____

Goal Setting Form with final goals is attached to the Educator Plan.

Some activities may apply to the pursuit of multiple goals or types of goals (student learning or professional practice). Attach additional pages as necessary.

Student Learning Goal(s): Planned Activities

*Describe actions the educator will take to attain the student learning goal(s).
Activities may apply to individual and/or team. Attach additional pages as needed.*

Action	Supports/Resources from School/District¹	Timeline or Frequency

*Additional detail may be attached if needed

Educator Plan Form

Educator—Name/Title: _____

Professional Practice Goal(s): Planned Activities <i>Describe actions the educator will take to attain the professional practice goal(s). Activities may apply to individual and/or team. Attach additional pages as needed.</i>		
Action	Supports/Resources from School/District ²	Timeline or Frequency
<ol style="list-style-type: none"> 1. I will attend district professional development on the Common Core. 2. I will meet with the building principal for additional coaching, if needed. 3. I will develop and implement grade appropriate lessons, weekly, which focus on the Common Core, Grades 3-5, Literacy: Speaking and Listening Standard (Comprehension and Collaboration). 	<ol style="list-style-type: none"> 1. The district/school will provide professional development on the Common Core. 2. The school's building principal will provide additional coaching, if needed, to support classroom teachers. 3. The school's building principal will provide additional coaching to classroom teachers, if needed, in developing grade appropriate lessons which focus on the Common Core in the area of physical education. 	Benchmarks: <ol style="list-style-type: none"> 1. By October 1, 2012, I will be able to explain the literacy standard: speaking and listening. 2. By November 1, 2012, I will have incorporated speaking and listening into my lessons, every week, in the area of physical education. 3. By February 1, 2013, I will have completed the goal.

This Educator Plan is “designed to provide educators with feedback for improvement, professional growth, and leadership,” is “aligned to statewide Standards and Indicators in 603 CMR 35.00 and local Performance Standards,” and “is consistent with district and school goals.”
 (see [603 CMR 35.06 \(3\)\(d\)](#) and [603 CMR 35.06\(3\)\(f\).](#))

Signature of Evaluator _____ Date _____

Signature of Educator _____ Date _____

* As the evaluator retains final authority over goals to be included in an educator’s plan (see [603 CMR 35.06\(3\)\(c\)](#)), the signature of the educator indicates that he or she has received the Goal Setting Form with the “Final Goal” box checked, indicating the evaluator’s approval of the goals. The educator’s signature does not necessarily denote

² Must identify means for educator to receive feedback for improvement per [603 CMR 35.06\(3\)\(d\)](#)

agreement with the goals. Regardless of agreement with the final goals, signature indicates recognition that “It is the educator’s responsibility to attain the goals in the plan and to participate in any trainings and professional development provided through the state, district, or other providers in accordance with the Educator Plan.” (see [603 CMR 35.06\(4\)](#))