**Fall Planning and Spring Reflection Document**

**Pilot Document**

Employee:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  School Year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ On-Cycle        Off-Cycle

Site:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Evaluator :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Reviewer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Goal 1- District and/or Site-Specific**

**Standard and Element:**Choose an item.

Describe the goal.  Be sure the goal is specific and measurable (quantitative and/or qualitative).

Which district and/or site goal does this address?

Action Plan:  What actions will you take to achieve the goal?

Mid-Year Review: Describe the successes and challenges to date you have experienced related to your goal.

Spring Reflection:  Describe your progress, successes, and challenges related to this goal.

**Goal 2- Personal**

**Standard and Element:**Choose an item.

Describe the goal.  Be sure the goal is specific and measurable (quantitative and/or qualitative).

Action Plan:  What actions will you take to achieve the goal?

Mid-Year Review: Describe the successes and challenges to date you have experienced related to your goal.

Spring Reflection:  Describe your progress, successes, and challenges related to this goal.

**Goal 3 (Optional to Teacher and/or Evaluator)**

**Standard and Element:** Choose an item.

Describe the goal.  Be sure the goal is specific and measurable (quantitative and/or qualitative).

Action Plan:  What actions will you take to achieve the goal?

Mid-Year Review: Describe the successes and challenges to date you have experienced related to your goal.

Spring Reflection:  Describe your progress, successes, and challenges related to this goal.

**Next Steps:**

Based on your Spring Reflection, what remains to be done with your current goal?

What other goals have you identified based on the current year that you may consider for next year?

Evaluatee’s Signature:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date: \_\_\_\_\_\_\_\_\_\_\_\_

Evaluator’s Signature:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date: \_\_\_\_\_\_\_\_\_\_\_\_ Last Update: September 2019