**Principal Evaluation Project**

**Goal Setting Form**

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| **Name**: | | | | **Title:** | | | | |
| **School:** | | | | **Academic Year:** | | | | |
| **Step 1 - Needs Assessment and Goal Selection** | | | | | | | | |
| Describe your selected professional growth areas of focus, as well as self-assessment information to support your selections. A self-assessment using state criteria, building student achievement data, a 360 degree feedback-type survey, discussions with your colleagues as well as supervisor, and the review of school/district improvement plans may provide guidance on a specific area for growth within the state criteria. Link each area of focus to a specific criterion. | | | | | | | | |
| **Rationale** | | **Criteria** | | | | **Goals** | | |
| **ASSESSMENT** | **DATA REVEALS** |  | | | |  | | |
| **Step 2 - Professional Growth Action Plan** | | | | | | | | |
| What specific growth activities will you engage in to obtain the identified new learning? The activities should focus on both the content knowledge you acquire as well as the skills you develop. | | | | | | | | |
| **Strategic Leadership Moves** | | | **Research Base that Supports Your Selection** | | **Target Date** | | **Evidence/Artifacts to Share with Supervisor** |
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| **Step 3 - Evidence of Professional Growth and Student Learning** | | | | | | | | |
| Brieflydescribe the evidence (**must be DATA**) of impact on student learning that you will collect. Evidence may include areas beyond test scores such as attendance rates, discipline referrals, programs implemented, and other student or adult data. | | | | | | | | |
| **Goal** | | | | **Evidence Collected** | | | | |
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| **Step 4 – Approval of Plan** | | | | | | | | |
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| **Step 5 – Modification of Plan (Optional)** | | | | | | | | |
| Brieflydetail any changes made to the plan since the original meeting. Should changes be made, please add reader initials to note approval. | | | | | | | | |
| **Goal** | | | | **Evidence Collected** | | | | |
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| **Step 6 – Progression of Plan** | | | | | | | | |
| **Formative Check-In #1** | | | | **Date:** | | | | |
| **Reflection from Administrator** | | | | **Reflection from Supervisor** | | | | |
| **Formative Check-In #2** | | | | **Date:** | | | | |
| **Reflection from Administrator** | | | | **Reflection from Supervisor** | | | | |
| **Summative Conference** | | | | **Date:** | | | | |
| **Reflection from Administrator** | | | | **Reflection from Supervisor** | | | | |
| **Step 7- Reflection/Implications** | | | | | | | | |
| Based on your collection of evidence and reflections above, what are some next steps that might guide future learning? | | | | | | | | |
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| **Step 8 - Verification of Completion** | | | | | | | | |
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