

Educator Evaluation Template

Plans to Support Continuous Improvement

Focused Support Plan	
The Focused Support Plan is not documented in the county personnel file.	
Educator:	Evaluator:
School:	County:
Grade/Content:	Conference Date:
End Date:	Progress Assessment Date:
Area(s) of concern and evidence:	
Expectations and Goals of Focused Support Plan:	

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Focused Support Plan	
Support to be given (check those that apply):	
☐ Professional Development	☐ Peer Observation
☐ Mentoring Coaching	☐ Programs of Study
☐ Instructional Support	☐ Other Supports
Explain support to be given:	
Focused Support Plan Timeline:	

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Plan Agreement

My signature below signifies my understanding of the expectations in the above plan as described.

Educator's Signature: _____ **Date:** _____

My signature below signifies my careful review of the above plan with the educator, and I have clearly communicated my expectations within the plan and agree to provide support.

Evaluator's Signature: _____ **Date:** _____

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Focused Support Plan Completion		
☐ Standard met. The educator is no longer on a Focused Support Plan.	☐ Adequate progress. The educator will complete another Focused Support Plan.	☐ Inadequate progress. An evaluation is completed. The educator is being placed on a Corrective Action Plan.
Explain the above statement:		

Educator's Signature: _____ Date: _____

Evaluator's Signature: _____ Date: _____