**PERFORMANCE GOAL**

**(Curriculum Instruction and Assessment)**

**NAME: ACADEMIC YEAR: 2014-2015**

**A. GOAL:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Strategies for Goal Completion**  **(Activities, plans, timeline, etc.)** | **Method(s) of Supervision**  **(Classroom observations, self-monitoring, self-evaluation, peer monitoring, etc.** | **Progress Indicators**  **(How will you know the goal is complete)** | **Analysis**  **(Self-assessment of this goal)** |
|  |  |  |  |

**PERFORMANCE GOAL**

**(Interpersonal Relationships, Professional Responsibilities, and/or Professional Growth)**

**B. GOAL:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Strategies for Goal Completion**  **(Activities, plans, timeline, etc.)** | **Method(s) of Supervision**  **(Classroom observations, self-monitoring, self-evaluation, peer monitoring, etc.)** | **Progress Indicators**  **(How will you know the goal is complete)** | **Analysis**  **(Self-assessment of this goal)** |
|  |  |  |  |

**PERFORMANCE GOAL**

**(Community of Faith & Zeal)**

**NAME: ACADEMIC YEAR: 2014-2015**

**C. GOAL:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Strategies for Goal Completion**  **(Activities, plans, timeline, etc.)** | **Method(s) of Supervision**  **(Classroom observations, self-monitoring, self-evaluation, peer monitoring, etc.** | **Progress Indicators**  **(How will you know the goal is complete)** | **Analysis**  **(Self-assessment of this goal)** |
|  |  |  |  |

|  |  |
| --- | --- |
| ***Plan has been discussed and agreed upon:*** | ***Plan completion:*** |
| Educator: Date: | Educator: Date: |
| Administrator: Date: | Administrator: Date: |