# Pre-Evaluation Form Plan to Demonstrate Competency Track II

	Level 2 – Complete four (4) forms, one for each of 4 State standards					
	Level 3 - Complete two (2) forms, one for each of 2 State standard	ds				
Name	: Date:					
Schools: Assignm						
	Grade Level:					
Stand	ard:  Consult and Collaborate with School Staff and/or Families to Engage an Students in Learning – Standard 1  Promote and Maintain a Safe and Supportive Learning Environment – S  Provide Crisis Intervention Services – Standard 3  Planning Instruction and Designing Learning Experiences for Students – Assessing Student Learning Patterns – Standard 5  Developing as a Professional School Psychologist – Standard 6	tandard 2				
Specif	Specific goal(s) addressed by this plan:					
Plan for implementation (includes strategies for school psychologist, timelines, resources or support):						
Plan fo	or monitoring progress:					
	ol Psychologist's Signature:	Date				
Evalua	ator's Signature:	Date				
Four	(4) Pre-Evaluation Forms Due: Oct 30	FORM 6				

Distribution: Evaluator, Evaluatee & Personnel File

#### SANTEE SCHOOL DISTRICT Formal Certificated Observation Track II

To be completed at least four (4) times during the evaluation year - Level 2
To be completed at least two (2) times during the evaluation year - Level 3

Name	Date				
Site	Day: M T W Th	F	Beginning Time	Duration of Observation	
Lesson Objective		Subject of Activity Observed			
Observed: It is not anticipated that each area will necessarily be observed in any given observation. Check item if observed. Check specific elements if appropriate. The four previously identified standards for the year should be checked at least once during the year.  Consult and Collaborate with School Staff and/or Families to Engage and Support Students in Learning – Standard 1  Promote and Maintain a Safe and Supportive Learning Environment – Standard 2  Provide Crisis Intervention Services – Standard 3  Planning Instruction and Designing Learning Experiences for Students – Standard 4  Assessing Student Learning Patterns – Standard 5  Developing as a Professional School Psychologist – Standard 6					
Evaluator's comments:					
School psychologist's analysis and reflection:					
Post conference summation:					
School Psychologist's Signature:				Date	
Evaluator's Signature:	Date				
Evaluatee's signature does not constitute endorsement of evaluator's comments, but acknowledges that					

FORM 7

an observation has taken place.

## SANTEE SCHOOL DISTRICT Track II Final Evaluation

Name:	Date:
Schools:	Assignment/
	Grade Level:

Feedback and recommendations of evaluator:

Satisfactory	Making Progress ☐	Unsatisfactory		
School Psychologist's Signature: Date				
☐ I intend to complete an Employee Comment, Reflections or Feedback form. (Form 8)				
Evaluator's Signature:		Date		
This form will be placed in the person Form Due: May 20	nel file.	FORM 8		

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### SANTEE SCHOOL DISTRICT Track II

### **Employee Comments, Reflections or Feedback** (Optional)

Name:	Date:
Schools:	Assignment/
	Grade Level:
Employee's comments, reflections or feedback:	

School Psychologist's Signature: \_\_\_\_\_\_ Date\_\_\_\_\_