Hisd Huron Intermediate School District

# School Psychologist Self-Evaluation (Form U)

Based on multiple administrator observations. School Psychologist Evaluation Framework (Form V) provides an explanation of evaluation criteria.

|  |  |  |
| --- | --- | --- |
|  | | |
| **Staff Member’s Name** | **Title** | |
| **Evaluator’s Name** | **Title** | **School Year** |
|  | | |
| *Instructions: Effectiveness shall be rated as shown below for each indicator:*  4 = Highly Effective 3 = Effective 2 = Minimally Effective 1 = Ineffective N/O = Not Observed | | |

|  |  |
| --- | --- |
| **Domain 1. Planning and Preparation R*ating*** | |
| ***1a. Knowledge & Skill of Psych. Instruments*** |  |
| Knowledge of psychological instruments to evaluate students; Knowledge of proper situation in which each instrument should be used | |
| ***1b. Demonstrating Knowledge of Students*** |  |
| Knowledge of child and adolescent development; Knowledge of the learning process; Students’ skills, knowledge, and language proficiency; Knowledge of students’ interests and cultural heritage; Knowledge of students’ special needs | |
| ***1c. Establishing Goals*** |  |
| Setting goals; reviewing and adjusting in consultation with others | |
| ***1d. Demonstrating Knowledge of Regulations & Resources*** |  |
| State and federal regulations; Resources within and beyond the school and district | |
| ***1e. Designing Coherent Plan*** |  |
| Psychology program plan; Integration with regular school program; Meet needs of students | |
| ***1f. Designing Plan for Program Evaluation*** |  |
| Plan to evaluate the psychology program; Improving the program | |
| **Domain 2. The Environment *Rating*** | |
| ***2a. Establishing Respect and Rapport*** |  |
| Psychologists interactions with students, words and actions;  Student comfort and trust | |
| ***2b. Establishing a Culture for Positive Mental Health*** |  |
| Culture throughout the school for positive mental health among students and teachers | |
| ***2c. Managing Clear Procedures for Referrals*** |  |
| Procedures for referrals, meetings, and testing protocols; Communication of procedures | |
| ***2d. Establishing Standards of Conduct*** |  |
| Expectations; Monitoring of student behavior; Response to student misbehavior | |
| ***2e. Organizing Physical Space*** |  |
| Safety and accessibility; Arrangement of furniture and use of physical resources; Securing records; Availability of materials | |
| **Domain 3. Delivery of Service *Rating*** | |
| ***3a. Communicating Clearly & Accurately*** |  |
| Use of oral and written language | |
| ***3b. Responding to Referrals & Consultation*** |  |
| Consultation with colleagues; Tailoring evaluations | |
| ***3c. Evaluating Student Needs*** |  |
| Administering evaluation instruments; Complying with procedural timelines and safeguards | |
| ***3d. Chairing Evaluation Team*** |  |
| Leadership of evaluation team; Preparing for meetings; preparing REEDs and IEPs | |
| ***3e. Planning Interventions*** |  |
| Plans for students; Strategies | |
| ***3f. Contact with Physicians & Community Mental Health Service Providers*** |  |
| Ongoing contact with physicians and community health service providers; Initiates contacts when needed | |
| ***3g. Demonstrating Flexibility & Responsiveness*** |  |
| Problem solving; Improving service delivery; Making changes in response to student, parent or teacher input | |
| **Domain 4. Professional Responsibilities *Rating*** | |
| ***4a. Reflecting on Practice*** |  |
| Reflecting on improving practice | |
| ***4b. Communicating with Families*** |  |
| Secure permission for evaluations; Information about evaluations | |
| ***4c. Maintaining Accurate Records*** |  |
| Completion; Accuracy; Organization; Security | |
| ***4d. Participating in the Professional Community*** |  |
| Relationships with colleagues; Involvement in a culture of professional inquiry; Service to the school; Participation in school and district projects | |
| ***4e. Engaging in Professional Development*** |  |
| Enhancement of knowledge & skill; Reflection on areas for growth; Service to the profession | |
| ***4f. Showing Professionalism*** |  |
| Integrity and ethical conduct; Service to students; Advocacy Decision making; Compliance with school and district regulations | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Staff Member’s Name** | | | | **Evaluator’s Name** | | | |
|  | | | | | | | |
| **Attendance**:  🞏 Attendance Record Attached | | | | **Summary Statement** | | | |
| **Teacher Disciplinary Record**: 🞏 Disciplinary Action on File | | | |
| **Accomplishments and Contributions Above Normal Expectations**: 🞏 Teacher-provided Documentation Attached | | | |
| **Non-required but Relevant Special Training**: 🞏 Teacher-provided Documentation Attached | | | | **Recommendation(s)** | | | |
| **Additional Documents Attached**: (Please list) 🞏 Teacher-provided Self-Evaluation Attached | | | |
|  | | | | | | | |
| **Overall Rating:** | ❑ Highly Effective | | ❑ Effective | | ❑ Minimally Effective | | ❑ Ineffective |
|  | | | | | | | |
| Staff Member’s Signature | | Date | | Evaluator’s Signature | | Date | |
| |  | | --- | | *Signature indicates completion of the evaluation process—not necessarily consensus* | |  | | | | | | | | |