**Form D: Vermilion Association for Special Education Performance Evaluation Rating (Summative) Form**

Teacher: Click here to enter text. Evaluator: Click here to enter text.

School/Position: Click here to enter text. Current Tenure Status: Choose an item.

Formal Observation Dates: Click here to enter a date. Informal Observation Dates: Click here to enter a date.

Performance Evaluation Rating Issued Date: Click here to enter a date.

Performance Evaluation Conference Date: Click here to enter a date.

Performance Evaluation Rating:

Domain 1: Domain 2: Domain 3: Domain 4:

A: Choose an item. A: Choose an item. A: Choose an item. A: Choose an item.

B: Choose an item. B: Choose an item. B: Choose an item. B: Choose an item.

C: Choose an item. C: Choose an item. C: Choose an item. C: Choose an item.

D: Choose an item. D: Choose an item. D: Choose an item. D: Choose an item.

E: Choose an item. E: Choose an item. E: Choose an item. E: Choose an item.

F: Choose an item. F: Choose an item. F: Choose an item. F: Choose an item.  
G: Choose an item. G: Choose an item. G: Choose an item. G: Choose an item.

H: Choose an item. H: Choose an item. H: Choose an item. H: Choose an item.

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| --- | --- | --- | --- |
| **Overall Rating** | | | |
| **Excellent** | **Proficient** | **Needs Improvement** | **Unsatisfactory** |
| Eighteen or more components are *Excellent* with the rest *Proficient* | No more than four components rated *Needs Improvement* with no more than two components at the *Needs Improvement* level in any one Domain with the remaining components rated *Proficient* or higher | Five or move components rated *Needs Improvement*  Three or more components rated *Needs Improvement* in any one Domain  One component rated Unsatisfactory | Two or more components rated *Unsatisfactory*  Two consecutive performance evaluation ratings of *Needs Improvement* |

We have conducted a conversation regarding **Form G-N: Vermilion Association for Special Education Framework for Teaching.** The Teacher has the right to attach written comments for inclusion in his/her personnel file. This overall rating is based on Vermilion Association for Special Education’s Performance Evaluation Definitions and Operating Principles.

Teacher Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Signature indicates only that the Teacher has received the evaluation.*

Evaluator Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_