

# STOCKTON UNIFIED SCHOOL DISTRICT



## EVALUATION ASSESSMENT

### CERTIFICATED ADMINISTRATOR

Name: \_\_\_\_\_

Employee ID No. \_\_\_\_\_

Assignment: \_\_\_\_\_

Location: \_\_\_\_\_

Date of Mid-Year Report \_\_\_\_\_

Date of Final Report: \_\_\_\_\_

**INSTRUCTIONS:** Rate the administrator on each item. Ratings of "Exceeds Expectations", "Needs Emphasis For Growth", and "Unsatisfactory" require written justification. Ratings of "Unsatisfactory" and "Needs Emphasis For Growth" must be accompanied by a specific plan for improvement.

Specific criteria for each of the seven areas are attached to this document (see attachment A). All criteria within the seven areas should be considered when rating the administrator. Mark the box to rate the administrator on each of the following seven (7) areas of leadership performance.

#### DEFINITIONS OF RATINGS

Exceeds Expectations: Skill(s) or performance is exemplary and clearly exceeds the expectations of this position.

Meets Expectations of the Position: The administrator possesses SUSD leadership qualities and skills and performs the duties of the position at the level defined.

Needs Emphasis for Growth: Skill(s) or performance as defined, needs strengthening in order to meet expectations of this position.

Unsatisfactory: Skill(s) or performance as defined, is seriously deficient. Failure to improve may result in a recommendation of probation or reassignment or other action.

Does Not Apply: Evaluator did not observe or have facts. Therefore, there is no basis upon which to make an assessment.

## Certificated Administrator Leadership

### Evaluation Assessment

Each administrator will be assessed based on seven (7) areas of leadership performance. These seven (7) areas are based on the Superintendent's "Seven Conditions for Success" and the "Focus Statement/Objectives" adopted by the Board of Education. These areas may be revised if changes are made by the Superintendent and/or the Board of Education

#### 1. Curriculum/Interactive Teaching/Staff Development

Exceeds Expectations	Meets Expectations	Needs Emphasis	Unsatisfactory	Does Not Apply

EVALUATOR COMMENTS:

#### 2. Student Support

Exceeds Expectations	Meets Expectations	Needs Emphasis	Unsatisfactory	Does Not Apply

EVALUATOR COMMENTS:

3. School Climate and Safety

Exceeds Expectations	Meets Expectations	Needs Emphasis	Unsatisfactory	Does Not Apply

EVALUATOR COMMENTS:

4. Parent/Community Involvement/Agency Collaboration

Exceeds Expectations	Meets Expectations	Needs Emphasis	Unsatisfactory	Does Not Apply

EVALUATOR COMMENTS:

5. Organizational Efficiency and Effectiveness

Exceeds Expectations	Meets Expectations	Needs Emphasis	Unsatisfactory	Does Not Apply

EVALUATOR COMMENTS:

6. Leadership

Exceeds Expectations	Meets Expectations	Needs Emphasis	Unsatisfactory	Does Not Apply

EVALUATOR COMMENTS:

7. Assessment

Exceeds Expectations	Meets Expectations	Needs Emphasis	Unsatisfactory	Does Not Apply

EVALUATOR COMMENTS:

FORM "A"

EVALUATOR'S OVERALL COMMENTS

The evaluator is to provide comments, commendations, recommendations and/or directions for improvement. Included in any directions for improvement will be a time frame for when improvements will be accomplished (attach additional sheets if necessary).

EVALUATOR'S RECOMMENDATION

\_\_\_\_\_ I recommend this administrator for continued employment in the present administrative position.

\_\_\_\_\_ I recommend a probationary period to improve performance for this administrator. An improvement plan is attached.

\_\_\_\_\_ I recommend this administrator not be reemployed in an administrative position.

\_\_\_\_\_  
Evaluator's Signature- Employee ID No.

Date: \_\_\_\_\_

\_\_\_\_\_  
Certificated Administrator's Signature

Date: \_\_\_\_\_

FORM "B"

ADMINISTRATOR'S COMMENTS

The administrator is to provide comments, responses and/or requests. If the administrator disagrees with the comments of the evaluation, the administrator is to specifically name the item in the evaluation with which he/she disagrees and state reasons for the disagreement.

ADMINISTRATOR'S VERIFICATION

I verify that my evaluator held an evaluation assessment conference with me reviewing the contents of this evaluation. My signature does not necessarily mean I agree with the contents of the evaluation only that it has been reviewed with me.

\_\_\_\_\_  
Signature of Administrator

\_\_\_\_\_  
Date

FORM "C"

PROFESSIONAL DEVELOPMENT PLAN

Each administrator is to submit a plan for his/her own professional development. Priorities for the Professional Development Plan will be student achievement, effective instructional strategies and school climate. The plan will also include activities for improving competencies identified by the evaluator as area(s) which needs emphasis for growth or unsatisfactory. This plan will be submitted to your evaluator by June 30 and revised as necessary.

\_\_\_\_\_  
Certificated Admin. Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Approved by Evaluator

\_\_\_\_\_  
Date

**Certificated Administrator Leadership  
Evaluation Assessment**

**FORM "D"**

A review of the rubric prepared by Educational Services will be an integral part of the evaluation process for each administrator at the site. A copy of the rubric for that school year will be provided to each administrator at the site no later than September 15 of that year. Failure to provide a copy of the rubric to an administrator by September 15 will mean that the rubric may not be used as part of the evaluation process for the administrator for that year.

**REVIEW OF RUBRIC**

General Review:

Specific Focus Statements:

Specific Recommendations:



**STOCKTON UNIFIED SCHOOL DISTRICT**  
**Certificated Administrator Evaluation**

Name: \_\_\_\_\_

Assignment: \_\_\_\_\_

**Instructions:** Each administrator shall develop a plan of objectives. Objectives must fall within the following seven areas of leadership. At least one objective for each area must be designated (see form A). Evaluator shall review and approve- objectives.

1. Curriculum/Interactive Teaching/Staff Development

2. Student Support

3. School Climate and Safety

4. Parent/Community Involvement/Agency Collaboration

5. Organizational Efficiency and Effectiveness

6. Leadership

7. Assessment

\_\_\_\_\_  
Evaluator's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Certificated Administrator's Signature

\_\_\_\_\_  
Date