Summative Evaluation Report Form

Educator—Name/Title: 

Primary Evaluator—Name/Title: 

Supervising Evaluator, if any—Name/Title/Role in evaluation: 

School(s): 

Current Plan: 

- Self-Directed Growth Plan
- Directed Growth Plan
- Developing Educator Plan
- Improvement Plan

### Progress Toward Student Learning Goal(s)

Attach additional pages as needed.

- Did not meet
- Some progress
- Significant Progress
- Met
- Exceeded

Rationale, evidence, and feedback for improvement:

### Progress Toward Professional Practice Goal(s)

Attach additional pages as needed.

- Did not meet
- Some progress
- Significant Progress
- Met
- Exceeded

Rationale, evidence, and feedback for improvement:
<table>
<thead>
<tr>
<th>Standard</th>
<th>Rating Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>I: Curriculum, Planning, &amp; Assessment</td>
<td>Unsatisfactory, Needs Improvement, Proficient, Exemplary</td>
</tr>
<tr>
<td>Rationale, evidence, and feedback for improvement:</td>
<td></td>
</tr>
<tr>
<td>II: Teaching All Students</td>
<td>Unsatisfactory, Needs Improvement, Proficient, Exemplary</td>
</tr>
<tr>
<td>Rationale, evidence, and feedback for improvement:</td>
<td></td>
</tr>
<tr>
<td>III: Family &amp; Community Engagement</td>
<td>Unsatisfactory, Needs Improvement, Proficient, Exemplary</td>
</tr>
<tr>
<td>Rationale, evidence, and feedback for improvement:</td>
<td></td>
</tr>
<tr>
<td>IV: Professional Culture</td>
<td>Unsatisfactory, Needs Improvement, Proficient, Exemplary</td>
</tr>
<tr>
<td>Rationale, evidence, and feedback for improvement:</td>
<td></td>
</tr>
</tbody>
</table>
Overall Performance Rating

- [ ] Unsatisfactory
- [ ] Needs Improvement
- [ ] Proficient
- [ ] Exemplary

Rationale, evidence, and feedback for improvement:

Plan Moving Forward

- [ ] Self-Directed Growth Plan
- [ ] Directed Growth Plan
- [ ] Improvement Plan
- [ ] Developing Educator Plan

The educator shall have the opportunity to respond in writing to the summative evaluation as per 603 CMR 35.06(6) on the Educator Response Form.

Signature of Evaluator ___________________________ Date Completed: ________________

Signature of Educator* ___________________________ Date Received: ________________

* Signature of the educator indicates acknowledgement of this report; it does not necessarily denote agreement with the contents of the report. Educators have the opportunity to respond to this report in writing and may use the Educator Response Form.