2020-2021 TESS Professional Growth Plan

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| **Administrator:** | **Observer:** |
| **Rating Status:*** Novice Educator - Formative Year 1
* Novice Educator - Formative Year 2
* Novice Educator - Formative Year 3
* Career Educator -Summative Year
* Career Educator – Formative Year 1
* Career Educator – Formative Year 2
* Career Educator – Formative Year 3
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Administrator Signature Date Observer Signature Date

DESE.Educator Effectiveness.Aug, 2019

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| **Professional Growth Goal** |
| **Reflecting on current performance, what are your areas of strength?** |  |
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| **Which rubric indicator(s) does this goal align with?** |

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| **Domain 1: Planning and Preparation** | **Domain 2: The Classroom Environment** |
| 1a – Demonstrating Knowledge of Content and Pedagogy | 2a – Creating an Environment of Respect and Rapport |
| 1b – Demonstrating Knowledge of Students | 2b – Establishing a Culture for Learning |
| 1c – Setting Instructional Outcomes | 2c – Managing Classroom Procedures |
| 1d – Demonstrating Knowledge of Resources | 2d – Managing Student Behavior |
| 1e – Designing Coherent Instruction | 2e – Organizing Physical Space |
| 1f - Designing Student Assessments |  |
| **Domain 4: Professional Responsibilities** | **Domain 3: Instruction** |
| 4a – Reflecting on Teaching | 3a – Communicating with Students |
| 4b – Maintaining Accurate Records | 3b – Using Questioning and Discussion Techniques |
| 4c – Communicating with Families | 3c – Engaging Students in Learning |
| 4d – Participating in a Professional Community | 3d – Using Assessment in Instruction |
| 4e – Growing and Developing Professionally | 3e – Demonstrating Flexibility and Responsiveness |
| 4f - Showing Professionalism |  |

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| **What specifics will help you know you’ve reached your goal?** |  |
|  | **How will you monitor progress?** |  |
|  | **How will you know when you’ve achieved your goal?** |  |
| **What data will you use to measure progress?**  |  |
| **What types of resources or supports do you need to complete this goal?** |  |
|  | **What will you do?** |  |
|  | **What will others Do?** |  |
|  | **How will these steps help you accomplish your goal?** |  |
| **How is this goal relevant to you and your students?** |  |
| **When will you collect data?**  |  |

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| PGP Review Check-in Mid-Year End of Year | Meeting Date: |
| Professional Growth Goal: |
| Goal steps or actions taken/achieved since previous meeting:  |
| Progress Continue GoalNext Meeting Date: | Next Steps:  |
| Progress Goal Achieved What steps will you take to ensure this work is continued and becomes the way things are done at your school/district? | Next Steps:  |

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