

4J Educator Goal Plan

Educator's Name _____

Assignment _____ Year _____ Building _____

(one sheet should be used for each goal developed by the educator)

I. GOAL

Objectives

II. ACTIVITIES

List the planned activities and/or procedures for achieving goal.

Approved by _____ Date _____
Supervisor's signature

III. EVIDENCE OF ACCOMPLISHMENTS

Educator: Comment on the degree to which this goal was accomplished and list the data used to support your judgment.

Teacher's Signature _____ Date _____

Supervisor's Signature _____ Date _____

Copy to Teacher, Copy to Supervisor, HR 9/04