## PERFORMANCE APPRAISAL ANNUAL SUMMATIVE RATING SY

Annual summative form used for provisional and professional information specialists.

## **Program Area: Information Specialist**

DISTRICT:

SCHOOL:

EDUCATOR'S NAME:

SOCIAL SECURITY NUMBER:

CHECK LEVEL:

<b>Provisional Year 1</b>	<b>Provisional Year 2</b>	
PGP Year 1	PGP Year 2	PGP Year

## SUPERVISOR'S NAME:

## CONFERENCE DATES:

	Professional Performance Elements	Meets	Does not meet
1.	Managing the Information Center (Critical)		
2.	Curricular Support (Critical)		
3.	Practicing Equity (Critical)		

FINAL ANNUAL RATING (check one):

Acceptable

Unacceptable

3

SIGNATURE OF EDUCATOR:

SIGNATURE OF EVALUATOR: Comments:

DATE:

DATE: