

**PERRIS UNION HIGH SCHOOL DISTRICT
 CERTIFICATED EVALUATION FORM
 Speech/Language Pathologist**

Tenured:
 Probationary: 1st 2nd
 Other:
 (not eligible for tenure)

Employee Name: _____

Work Site: _____

School Year: _____

Scale: M=Meets Standards N=Needs Improvement U=Unsatisfactory NA=Not Applicable

In the areas of evaluation below, check off your rating of the employee based on the above scale in the boxes provided. A “Needs Improvement” or an “Unsatisfactory” rating must be accompanied by specific written suggestions to improve performance (use Improvement Plan).

Standards of Professional Performance:	M	N	U	NA
Standard 1: Preparation and Planning - Time Management				
1.1 Maintains appointments with parents/staff/students				
1.2 Presents reports to parents and staff in accordance with time lines				
1.3 Schedules pupil therapy during non-core subjects				
Standard 2: Administers Individual Assessments				
2.1 Administers appropriate assessments				
2.2 Develops written reports from assessments				
2.3 Responsible for Three (3) Year Plans for students who are DIS S/L only				
2.4 Adheres to all timelines				
Standard 3: General Speech/Language Pathology				
3.1 Maintains strong knowledge of individual assessment instruments				
3.2 Adheres to state and district eligibility criteria for all students assessed				
3.3 Participates in parent/student/staff conferences when requested				
3.4 Clearly explains the results of the evaluations to parents and staff within legal time lines				
3.5 Provides therapy as written on IEP				
3.6 Develops schedule and caseload; notifies District Office and school site of changes				
Standard 4: Professionalism				
4.1 Establishes and maintains effective communications with parents/students/staff				
4.2 Prepares and maintains accurate contact logs, registers, and reports for all students evaluated				
4.3 Maintains a professional demeanor at all times				
4.4 Displays empathy and respect for students				
4.5 Adheres to contractual hours of employment				
4.6 Keeps informed of changes in the laws affecting job performance				
4.7 Participates in professional growth and staff development activities				

Standards of Professional Performance:	M	N	U	NA
4.8 Adheres to guidelines for confidentiality issues				
4.9 Establishes and maintains productive working relationships				

5. Overall Evaluation:

a. Commendations:

b. Recommendations:

6. Improvement Plan: This employee performs professional duties conducive to the academic, social, and emotional needs of all students.

Yes No Needs to improve

Date scheduled to review Improvement Plan (if needed):

7. Employment Status Recommendation:

8. Five-Year Evaluation:

- Employee requests an initial five-year evaluation: Yes No
- Evaluator approves based on established criteria in Education Code Section 44664: Yes No
- Assistant Superintendent gives final approval: Yes No

Signature, Asst. Supt. – Human Resources

Evaluatee’s signature does not indicate endorsement of the evaluation but is recognition that discussion has taken place. Unit member may submit a letter of rebuttal to evaluation, if they so desire.

Evaluatee’s Signature

Date

Evaluator’s Signature

Date

White: Personnel File
Yellow: Site Administrator
Pink: Employee