

**PERRIS UNION HIGH SCHOOL DISTRICT
CERTIFICATED IMPROVEMENT PLAN**

Tenured:

Probationary:

1st

2nd

Other:

Employee Name: _____

Position: _____

Work Site: _____

School Year: _____

Any permanent certificated unit member who has received an unsatisfactory evaluation, shall be evaluated annually until the unit member achieves a positive Certificated Evaluation Report or is separated from the district. In the event the Certificated Evaluation Form of any unit member contains an unsatisfactory rating of the unit member's performance, the district shall require an Improvement Plan which must be in effect for a minimum of 4 weeks before a notice of unsatisfactory performance can be given. Such evaluation may also include a requirement that the unit member shall participate in a program designed to improve appropriate areas of the unit members' performance. Specific written recommendations and/or assistance shall be given for improving performance when the evaluation contains an unsatisfactory rating for any reason. When the Evaluator indicates to an Evaluatee on the Certificated Evaluation Form that overall performance needs improvement or does not meet assessment criteria, specific suggestions must be in writing on this form to include all Areas of Improvement listed below.

AREAS OF IMPROVEMENT:
1. Area where improvement is needed:
2. Specific suggestions for improvement:
3. Additional resources that will be utilized to assist with improvement:
4. Evaluator's role in assisting teacher:
5. Beginning date:
6. Completion date:

Evaluatee's Signature

Date

Evaluator's Signature

Date

White: Personnel File
Yellow: Site Administrator
Pink: Employee