**Reflective Practice, Student Growth, TELL KY Working Conditions and**

**Professional Growth Planning Template**

|  |  |
| --- | --- |
| **Principal** |  |
| **School** |  |
| **Level**  |  |

**Part A: Reflection on the Standards in the Kentucky Principal Professional Growth and Effectiveness System**

*Reflect on the effectiveness and adequacy of your practice in each of the performance standards. Provide a rating (I = Ineffective; D = Developing; A = Accomplished; E=Exemplary) on each performance standard and list your strengths and areas for growth.*

|  |  |  |
| --- | --- | --- |
| **Standard** | **Self-Assessment** | **Strengths and areas for growth** |
| **1. Instructional Leadership***The principal fosters the success of all students by facilitating the development, communication, implementation, and evaluation of a shared vision of teaching and learning that leads to student academic growth and school improvement.* | [ ] I | [ ] D | [ ] A | [ ] E |  |
| **2. School Climate***The principal fosters the success of all students by developing, advocating, and sustaining an academically rigorous, positive, and safe school climate for all stakeholders.* | [ ] I | [ ] D | [ ] A | [ ] E |  |
| **3. Human Resource Management***The principal fosters effective human resources management by assisting with selection and induction, and by supporting, evaluating, and retaining quality instructional and support personnel.* | [ ] I | [ ] D | [ ] A | [ ] E |  |
| **4. Organizational Management***The principal fosters the success of all students by supporting, managing, and overseeing the school’s organization, operation, and use of resources.* | [ ] I | [ ] D | [ ] A | [ ] E |  |
| **5. Communication and Community Relationship***The principal fosters the success of all students by communicating and collaborating effectively with stakeholders.* | [ ] I | [ ] D | [ ] A | [ ] E |  |
| **6. Professionalism***The principal fosters the success of all students by demonstrating professional standards and ethics, engaging in continuous professional learning, and contributing to the profession*. | [ ] I | [ ] D | [ ] A | [ ] E |  |

Examine additional relevant data sources to make an informed decision on growth needs. Select an area of growth from the above self-reflection to focus your professional growth goals.

**Part B-1: State Student Growth**

|  |  |
| --- | --- |
| **State Student Growth Goal Statement**(*Based on one of the State goals within your CSIP.)* |  |
| **Process or Rubric for Determining High, Expected or Low Growth.**  |  |
| **Principal’s Student Growth Plan***This plan will outline what the* ***principal*** *will do to impact the student growth goal.* *(Should be different than the school CSIP plan strategies/actions)* |
| **Strategies/Actions** What strategies/actions will I need to do in order to assist my school in reaching the goal?How will I accomplish my goal? | **Resources/Support**What resources will I need to complete my plan?What support will I need? | **Targeted Completion Date**When will I complete each identified strategy/ action? |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**Part B-2: Local Student Growth**

|  |  |
| --- | --- |
| **Local Student Growth Goal Statement**(*Based on School Need* |  |
| **Process or Rubric for Determining High, Expected or Low Growth** |  |
| **Principal’s Student Growth Plan***This plan will outline what the* ***principal*** *will do to impact the student growth goal.* *(Should be different than the school CSIP plan strategies/actions)* |
| **Strategies/Actions** What strategies/actions will I need to do in order to assist my school in reaching the goal?How will I accomplish my goal? | **Resources/Support**What resources will I need to complete my plan?What support will I need? | **Targeted Completion Date**When will I complete each identified strategy/ action? |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**Part C: Principal’s TELL Kentucky Working Conditions Goal**

**Target Question(s) from TELL Kentucky Results:**

Following a review of TELL Kentucky results, the principal, in collaboration with the superintendent, will identify questions that signify areas of growth that the principal can address that will impact school culture and ultimately student success.

|  |
| --- |
|  |

**Target Performance Standard:**

The principal will connect the Target Questions to the appropriate Performance Standard, which becomes the Target Performance Standard for the WC Growth Goal.

|  |
| --- |
|  |

**Working Conditions Growth Goal Statement:**

The WC Growth Goal statement should be specific to the principal and should identify the specific growth that the principal plans to accomplish in the 2-year cycle of TELL Kentucky.

|  |
| --- |
|  |

**Working Conditions Growth Goal Rubric:**

The rubric is established when setting the WC Growth Goal in collaboration with the Superintendent. An “Accomplished” result is the expected outcome from the goal. To achieve “Exemplary” the goal must be exceeded.

|  |  |  |  |
| --- | --- | --- | --- |
| Ineffective  | Developing  | Accomplished | Exemplary  |
| % and below | %-% | %-% | % and above |

|  |
| --- |
| **Working Conditions Goal Action Plan** |
| **Working Conditions**What do I want to change about my leadership or role that will effectively impact working conditions in my school and their impact on student learning? | **Strategies/Actions** What will I need to do in order to impact the target standard and target question(s)?How will I apply what I have learned?How will I accomplish my goal? | **Resources/Support**What resources will I need to complete my plan?What support will I need? | **Targeted Completion Date**When will I complete each identified strategy/ action? |
|  |  |  |  |

**Part D: Connecting Priority Growth Needs to Professional Growth Planning**

**Professional Growth Goal: Answer all THREE questions to develop your goal.**

|  |  |
| --- | --- |
| **What do I want to change about my practices that will effectively impact student learning?** |  |
| **How can I develop a plan of action to address my professional learning?** |  |
| **How will I know if I accomplished my objective?** |  |

|  |
| --- |
| **Connection to Standards** |
| The Principal should connect the PGP Goal to the appropriate performance standard and list that standard below. |
|  |
| **Action Plan** |
| **Professional Learning**What do I want to change about my leadership or role that will effectively impact student learning?What is my personal learning necessary to make that change? | **Strategies/Actions** What will I need to do in order to learn my identified skill or content?How will I apply what I have learned?How will I accomplish my goal? | **Resources/Support**What resources will I need to complete my plan?What support will I need? | **Targeted Completion Date**When will I complete each identified strategy/ action? |
|  |  |  |  |

|  |  |
| --- | --- |
| **Administrator’s Signature:** | **Date:** |
| **Superintendent’s Signature:** | **Date:** |

**2) On-going Reflection:** Complete this section at mid-year to identify progress toward each Student Growth/Working Conditions/Professional Growth Goal

|  |
| --- |
| **Principal Growth Goals-Review** |
|  (Describe goal progress and other relevant data.) | Mid-year review conducted on\_\_\_\_\_\_\_\_ Initials \_\_\_\_\_\_ \_\_\_\_\_\_ Principal’s Superintendent  |

|  |  |  |
| --- | --- | --- |
| **Date** | **Status of Growth Goal(s) – SGG, WC, PGP** | **Revisions/Modifications of Strategies or Action Plans** |
|  |  |  |
|  |  |  |

|  |  |
| --- | --- |
| **Administrator’s Signature:** | **Date:** |
| **Superintendent’s Signature:** | **Date:** |

**3) Summative Reflection:** *Complete this section at the end of the year to describe the level of attainment for each Professional Growth Goal*

|  |  |
| --- | --- |
| **Date:** | **End of Year Student Growth Reflection:** |
| **End-of-Year Data Results** (Accomplishments at the end of year.) | [ ] Data attached |
| **Date:** | **End of Year TELL KY Working Conditions Growth Reflection:** |
|  |  |
| **Date:** | **End of Year Professional Growth Reflection:** |
|  |  |

|  |
| --- |
| **Next Steps:** |
|  |

|  |  |
| --- | --- |
| **Administrator’s Signature:** | **Date:** |
| **Superintendent’s Signature:** | **Date:** |