



# Powell County Schools

## Classified Evaluation

### FRYSC/COMMUNITY ED

### COORDINATOR



Name: \_\_\_\_\_ Position: \_\_\_\_\_

Building Location: \_\_\_\_\_ School Year: \_\_\_\_\_

#### CLASSIFIED EVALUATION PROCESS

| Component of Evaluation Process   | Coordinator  | Supervisor  |
|---|--|---|
| Self-Reflection   | Completed by August 30th or within 30 days of hire   | Reviewed by September 15th or within 15 days of due date for new hires  |
| Professional Growth Plan  | Completed by August 30th or within 30 days of hire   | Approved by September 15th or within 15 days of due date for new hires  |
| Beginning of the year conference to review self-reflection and PGP, establish goals, and discuss concerns | Conference between evaluatee and supervisor by September 15th or within 15 days of hire for new hires                  | Conference between evaluatee by September 15th or within 15 days of hire for new hires  |
| Professional Learning   | Document throughout the year; best practice to complete required hours prior to summative evaluation but Due June 30th | Review during summative evaluation  |
| Summative Evaluation  | To be completed by the supervisor and reviewed with the evaluatee by May 1st   | To be completed by the supervisor and reviewed with the evaluatee by May 1st<br><br>Must be filed with the evaluation coordinator by May 15th |

## Powell County FRYSC/Community Ed Self-Reflection Page 1 of 2

*Using the FRYSC/Community Ed Performance Standards, complete your self-reflection on the next two slides by assessing yourself as satisfactory, improvement needed, or unsatisfactory for each performance standard and identify strengths and areas of growth for each standard.*

**Due Date: August 30th or within 30 days of hire**

| Performance Standard                                      | Standard Description                                    | Self-Assessment<br>(Satisfactory, Needs Improvement, or Unsatisfactory) | Strengths and areas for growth |
|---|---|---|--------------------------------|
| <b>Standard 1</b><br>School/<br>District<br>Collaboration | Collaborates effectively with school and district staff |   |                                |
| <b>Standard 2</b><br>Student/<br>Family<br>Assistance     | Assist students and families with needed resources      |   |                                |
| <b>Standard 3</b><br>Center/<br>Program<br>Management     | Manages and consistently improves center/program        |   |                                |

## Powell County FRYSC/Community Ed Self-Reflection Page 2 of 2

| Performance Standard                             | Standard Description   | Self-Assessment (Satisfactory, Needs Improvement, or Unsatisfactory) | Strengths and areas for growth |
|--|--|--|--------------------------------|
| <b>Standard 4</b><br>Responsibility              | Maintains confidentiality, is well organized, makes good judgment, and takes initiative in seeking other tasks when extra time is available. |  |                                |
| <b>Standard 5</b><br>Attendance                  | Maintains punctuality and good attendance record.  |  |                                |
| <b>Standard 6</b><br>Interpersonal Relationships | Has good rapport and communication skills with co-workers, students, supervisors, parents, and community members.                            |  |                                |

**Coordinator Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

# Powell County FRYSC/Community Ed Professional Growth Plan

## Page 1 of 2

*Using your self-reflection, additional data, and consultation with your supervisor, complete your professional growth plan by developing two professional growth goals and identifying the standard(s) aligned to each of your growth goals.*

***Due Date: August 30th or within 30 days of hire***

|  |  |
|--|--|
| <b>Professional Growth Goal #1</b>                     |  |
| <b>Standard(s) Aligned to Professional Growth Goal</b> |  |

|  |  |
|--|--|
| <b>Professional Growth Goal #2</b>                     |  |
| <b>Standard(s) Aligned to Professional Growth Goal</b> |  |

**Powell County FRYSC/Community Ed Professional Growth Plan**  
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| Comments   | Coordinator Comments | Supervisor Comments |
|--|----------------------|---------------------|
| <b>Comments for Initial Approval</b><br><i>Completed at Beginning of the Year Conference</i> |                      |                     |
| <b>Comments for End of Year Review</b><br><i>Completed at End of Year Conference</i>         |                      |                     |

| Conference                   | Date | Coordinator Signature | Supervisor Signature |
|------------------------------|------|-----------------------|----------------------|
| Beginning of Year Conference |      |                       |                      |
| End of Year Conference       |      |                       |                      |

## Powell County FRYSC/Community Ed Professional Learning Log

*Document all Professional Learning hours on the Powell County Learning Log Slide to review with your supervisor during the end of year conference.*

**Due Date: June 30th**

**Best Practice to be completed prior to your Summative Evaluation**

| Date | Hours<br>24<br>required | Name of Professional Learning<br>Engaged or Presented | Professional Reflections |
|------|-------------------------|---|--------------------------|
|      |                         |   |                          |
|      |                         |   |                          |
|      |                         |   |                          |
|      |                         |   |                          |
|      |                         |   |                          |
|      |                         |   |                          |
|      |                         |   |                          |
|      |                         |   |                          |
|      |                         |   |                          |

**TOTAL:** \_\_\_\_\_

**Coordinator Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

# Powell County FRYSC/Community Ed Summative Evaluation

*Using data collected through daily performance, conferences, and other sources of evidence,  
your supervisor will complete the summative evaluation*

**Due Date: May 1st**

**Name:** \_\_\_\_\_ **Position:** \_\_\_\_\_

|  |          |          |          |            |
|--|----------|----------|----------|------------|
| <b>SCHOOL/DISTRICT COLLABORATION:</b> <i>Collaborates effectively with school and district staff</i>   | <b>S</b> | <b>I</b> | <b>U</b> | <b>N/A</b> |
| <b>A.</b> Collaborates with school personnel to identify students in need of services  |          |          |          |            |
| <b>B.</b> Collaborates with school/district for family involvement activities  |          |          |          |            |
| <b>C.</b> Collaborates with district coordinator(s), principal, advisory council, and other school/district officials on center programming and operation                  |          |          |          |            |
| <b>STUDENT/FAMILY ASSISTANCE:</b> <i>Assist students and families with needed resources</i>  | <b>S</b> | <b>I</b> | <b>U</b> | <b>N/A</b> |
| <b>A.</b> Assist students and/or families in obtaining appropriate community resources   |          |          |          |            |
| <b>B.</b> Assist students with basic needs to reduce/remove educational barriers   |          |          |          |            |
| <b>C.</b> Provides referrals, as needed, for student and family support  |          |          |          |            |
| <b>CENTER/PROGRAM MANAGEMENT:</b> <i>Manages and consistently improves center/program</i>  | <b>S</b> | <b>I</b> | <b>U</b> | <b>N/A</b> |
| <b>A.</b> Maintains accurate records and budget  |          |          |          |            |
| <b>B.</b> Attends required trainings both locally and regionally   |          |          |          |            |
| <b>C.</b> Consistently evaluates and monitors center/program for improvement   |          |          |          |            |
| <b>RESPONSIBILITY:</b> <i>Maintains confidentiality, is well organized, makes good judgment, and takes initiative in seeking other tasks when extra time is available.</i> | <b>S</b> | <b>I</b> | <b>U</b> | <b>N/A</b> |
| <b>A.</b> Uses discretion with confidential and privileged information   |          |          |          |            |
| <b>B.</b> Uses good judgment in performing job duties  |          |          |          |            |
| <b>C.</b> Completes job duties without close supervision   |          |          |          |            |

|  |          |          |          |            |
|--|----------|----------|----------|------------|
| <b>ATTENDANCE: <i>Maintains punctuality and good attendance record.</i></b>  | <b>S</b> | <b>I</b> | <b>U</b> | <b>N/A</b> |
| A. Maintains a good attendance record  |          |          |          |            |
| B. Reports to work on time and remains at work for the entire scheduled work day   |          |          |          |            |
| C. Returns to work from break and/or lunch on time   |          |          |          |            |
| <b>INTERPERSONAL RELATIONSHIPS: <i>Has good rapport and communication skills with co-workers, students, supervisors, parents, and community members.</i></b> | <b>S</b> | <b>I</b> | <b>U</b> | <b>N/A</b> |
| A. Has positive rapport with students, co-workers, and administration  |          |          |          |            |
| B. Has positive rapport with parents, community members and other stakeholders   |          |          |          |            |
| C. Has good communication skills both written and oral   |          |          |          |            |

|                              |  |
|------------------------------|--|
| <b>Coordinator Comments:</b> |  |
| <b>Supervisor Comments:</b>  |  |

|                                      |  |  |  |
|--------------------------------------|--|--|--|
| <b>Recommended for re-employment</b> |  | <b>Not recommended for re-employment</b> |  |
|--------------------------------------|--|--|--|

**Coordinator Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Supervisor Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*The signing of this document does not imply agreement or disagreement with the content of this report. Classified employees have the right to appeal the substance and/or procedure of this summative evaluation within five (5) working days.*