

DIXON PUBLIC SCHOOLS #170

"A Place to Grow"

Informal Evaluation Instrument

Teacher's Name _____ Position _____

Building _____ School Year _____ Date _____

Domain 1: PLANNING AND PREPARATION
<input type="checkbox"/> 1a. Demonstrating knowledge of content and pedagogy
<input type="checkbox"/> 1b. Knowledge of students
<input type="checkbox"/> 1c. Setting instructional outcomes
<input type="checkbox"/> 1d. Knowledge of instructional strategies
<input type="checkbox"/> 1e. Designing student assessments
Domain 2: THE CLASSROOM ENVIRONMENT
<input type="checkbox"/> 2a. Creating an environment of respect and rapport
<input type="checkbox"/> 2c. Managing classroom procedures
<input type="checkbox"/> 2d. Managing student behavior
<input type="checkbox"/> 2e. Organizes physical space
Domain 3: INSTRUCTION
<input type="checkbox"/> 3a. Communicating with students
<input type="checkbox"/> 3b. Using questioning and discussion techniques
<input type="checkbox"/> 3c. Engaging students in learning
<input type="checkbox"/> 3d. Using assessment in instruction
<input type="checkbox"/> 3e. Demonstrating flexibility and responsiveness
Domain 4: PROFESSIONAL RESPONSIBILITIES
<input type="checkbox"/> 4a. Maintaining accurate records
<input type="checkbox"/> 4b. Communicating with families
<input type="checkbox"/> 4c. Participating in a professional community
<input type="checkbox"/> 4d. Growing and developing professionally
<input type="checkbox"/> 4e. Showing professionalism

Evaluator Comments:

Evaluator's Signature

Date

Evaluatee's Signature

Date

Evaluatee's Comments (if any):

The teacher's signature does not indicate agreement with the evaluation. The teacher may attach additional information and comments.