

UPPER ARLINGTON CITY SCHOOLS
Media Specialist Evaluation



Name _____ Date _____

Evaluator(s) _____

Note that when completing the performance rubric, evaluators are not expected to gather evidence on all indicators for each observation cycle. Likewise, educators may, but are not required to, bring additional pieces of evidence to address all indicators.

| | Expectation | Needs Improvement | Meets Expectations | Exceeds Expectations | Evaluator Comments / Evidence | Educator Comments / Evidence |
|-----------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|-------------------------------|------------------------------|
| Planning and Preparing for Instruction | | | | | | |
| Knowledge of Content | Displays knowledge of library/media curriculum and current trends and practices in literature, literacies, technology, and research process. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Promotes Literacy | Works with groups and individuals to promote books in all formats, reading for pleasure and/or personal growth. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Communication | Directions, procedures and/or explanations are clear and accurate. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Guiding | Guides students to appropriate engaging resources that connect well with the content learning goals, the students' prior knowledge backgrounds and experiences. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Technology | Technology is used effectively to incorporate and model productive ways to utilize resources and tools in a variety of learning environments. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |

| | | | | | | |
|---------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--|--|
| Engaging in Instruction and Learning | | | | | | |
| Student Interaction | Interactions with students are polite and respectful, and are appropriate to the cultural and developmental differences among groups of students. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Protocols | Standards of conduct, routines and procedures are well understood and may be initiated by students. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Environment | Creates and maintains an inviting, flexible, engaging environment. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |

| | | | | | | |
|--------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--|--|
| Professional Responsibilities | | | | | | |
| Professional Development | Interactions with students are polite and respectful, and are appropriate to the cultural and developmental differences among groups of students. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Program Management | Standards of conduct, routines and procedures are well understood and may be initiated by students. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Inventory Management | Creates and maintains an inviting, flexible, engaging environment. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |

| Cumulative Scoring | | | Evaluation Breakdown |
|---------------------------|---|---------|----------------------|
| Needs Improvement | 0 | #DIV/0! | |
| Meets Expectations | 0 | #DIV/0! | |
| Exceeds Expectations | 0 | #DIV/0! | |

Evaluator Signature _____ Date _____

By signing below, I acknowledge that I have read and reviewed the contents of this form. This does not indicate agreement.

Employee Signature _____ Date _____

UPPER ARLINGTON CITY SCHOOLS
Licensed School Nurse Evaluation



Name _____ Date _____

Evaluator(s) _____

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| Expectation | Needs Improvement | Meets Expectations | Exceeds Expectations | Evaluator Comments / Evidence | Educator Comments / Evidence |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|-------------------------------|------------------------------|
| Collaboration | | | | | |
| Communicating and consulting with administration re: policies, procedures, and services | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Demonstrates respect of cultural and individual values regardless of background | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Seeks assistance, if needed, when trying to resolve conflicts with others (parents, students, staff, etc.) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Collaborates with teachers, school counselor, and other related staff to assist students in areas of health, wellness, and connectedness to positive impact learning and school experience | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Provides timely updates to appropriate staff members regarding student | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Professional Responsibilities | | | | | |
| Applies current best practices in discipline area | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Maintains and develops skills and knowledge to one's own function or work group (specific training) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Provides a welcoming clinic environment | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Initiative and Education | | | | | |
| Responds appropriately on own to improve outcomes, processes, or measurements | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Accomplishes goals independently. Takes ownership and accountability for own performance | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Actively seeks out and/or accepts additional responsibilities in the context of the job | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Attends staff meetings/in-services, etc. and actively participates | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Stays aware of major developments in discipline | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Attends conferences, webinars, etc. for professional growth | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Acts as an advocate for students and families | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Serves as a member of pertinent committees | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |

Cumulative Scoring

Needs Improvement 0 #DIV/0!
 Meets Expectations 0 #DIV/0!
 Exceeds Expectations 0 #DIV/0!

Final Rating Percentage

Evaluator Signature _____ Date _____

By signing below, I acknowledge that I have read and reviewed the contents of this form. This does not indicate agreement.

Employee Signature _____ Date _____

UPPER ARLINGTON CITY SCHOOLS

Online Academy Educator Evaluation



Name _____ Date _____

Evaluator(s) _____

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| Expectation | Needs Improvement | Meets Expectations | Exceeds Expectations | Evaluator Comments / Evidence | Educator Comments / Evidence |
|----------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|-------------------------------|------------------------------|
| Communication | | | | | |
| Sets/holds regularly scheduled office hours | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Reasonable response time to communication from students/parents | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Provides course announcements/news updates, in writing, on a regular basis | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Sets/holds regular times to check on social-emotional well-being of students | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| School Environment | | | | | |
| Interacts with students and families in a respectful, professional, and ethical manner | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Demonstrates understanding of student background and needs | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Collaboration | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Active Learning Techniques | | | | | |
| Responds to/grades student work in a timely manner | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Gives students encouragement, reflection, and correction feedback | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Utilizes understanding of student needs to adjust content appropriately | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Student Support and Growth | | | | | |
| Communicates progress toward week and/or unit goals | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Provide individual progress milestones for graded work | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Provides a clear schedule for due dates | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Provide preview sessions to support student understanding of upcoming material | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |

Cumulative Scoring

| | | |
|----------------------|---|---------|
| Needs Improvement | 0 | #DIV/0! |
| Meets Expectations | 0 | #DIV/0! |
| Exceeds Expectations | 0 | #DIV/0! |

Evaluation Breakdown

Evaluator Signature _____ Date _____

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Employee Signature _____ Date _____

UPPER ARLINGTON CITY SCHOOLS

Occupational Therapist, Physical Therapist, and Speech and Language Pathologist Evaluation



Name _____ Date _____

Evaluator(s) _____

Note that when completing the performance rubric, evaluators are not expected to gather evidence on all indicators for each observation cycle. Likewise, educators may, but are not required to, bring additional pieces of evidence to address all indicators.

| Expectation | Needs Improvement | Meets Expectations | Exceeds Expectations | Evaluator Comments / Evidence | Educator Comments / Evidence |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|-------------------------------|------------------------------|
| Focus for Learning/Prep and Planning | | | | | |
| The educator contributes to data-based decision making by supporting collection of student data, summarizing and interpreting progress data, and making recommendations about the need for services/supports based on student data. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| The educator demonstrates knowledge and pedagogy of their content to create individualized therapy to meet the unique needs of each student. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| School Environment | | | | | |
| The educator interacts with students, parents/families, community members, and colleagues in a respectful, professional, ethical, and confidential manner. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| The educator demonstrates an understanding of and sensitivity to the influence of factors such as culture, socioeconomic status, gender, religion, disability, and health status on student learning and behavior. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| The educator utilizes information about students' backgrounds, skills, interests, special needs, and prior learning to inform interventions or therapy. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Delivery of Services | | | | | |
| The educator utilizes knowledge to provide staff/student training on strategies related to accommodations/modifications to access curriculum and school environment. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| The educator advocates for appropriate referrals and utilization of resources and/or services. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| The educator contributes to student intervention practices by selecting and implementing appropriate intervention plans. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| The educator applies progress monitoring data to guide decisions about the needs for adjustments of intervention | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| The educator consistently utilizes assessment and data collection methods when conducting evaluations to inform eligibility, service, and instructional and/or programming purposes. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Professional Responsibilities | | | | | |
| The educator communicates strategies and engages with staff and families, to attempt to build partnerships that can contribute to student learning, well-being and development. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| The educator communicates and collaborates with colleagues to examine instructional practice and analyze patterns in student work and student data to identify and implement targeted strategies for improving professional practice. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| The educator demonstrates understanding by following communicated district policies, state and federal regulations, and the Licensure Code of Professional Conduct for Ohio Educators. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| The educator sets short-term and long-term professional goals and monitors progress in meeting them based on self-reflection and data analysis. The educator takes appropriate action to meet the goals. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Cumulative Scoring | | | | | |
| Needs Improvement | 0 | #DIV/0! | Final Rating Percentage | | |
| Meets Expectations | 0 | #DIV/0! | | | |
| Exceeds Expectations | 0 | #DIV/0! | | | |

Evaluator Signature _____ Date _____

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UPPER ARLINGTON CITY SCHOOLS

School Psychologist Evaluation



Name _____ Date _____

Evaluator(s) _____

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| Expectation | Needs Improvement | Meets Expectations | Exceeds Expectations | Evaluator Comments / Evidence | Educator Comments / Evidence |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|-------------------------------|------------------------------|
| Focus for Learning/Prep and Planning | | | | | |
| The school psych's contribution to a team's collaboration incorporates activities, assessments and resources, including available technology, that align with teacher/student needs, school and district priorities and Ohio's Learning Standards. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| The school psych follows and adheres to all federal, state and district timelines to assist in meeting the known and communicated legal requirements. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Building/District Climate and Cultural Competency | | | | | |
| There is evidence of rapport and expectations for respectful, supportive and caring interactions with and among the staff. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| There is demonstration of regard for teacher perspectives, experiences and culture. The school psychologist models expectations and behaviors that create a positive climate of openness, respect and care. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Professional Responsibilities | | | | | |
| The school psychologist communicates strategies and engages with staff and families, to attempt to build partnerships that can contribute to student learning, well-being and development. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| The school psychologist communicates and collaborates with colleagues to examine instructional practice and analyze patterns in student work and student data to identify and implement targeted strategies for improving professional practice. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| The school psychologist demonstrates understanding by following communicated district policies, state and federal regulations, and the Licensure Code of Professional Conduct for Ohio Educators. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| The school psychologist sets short-term and long-term professional goals and monitors progress in meeting them based on self-reflection and data analysis. The School Psychologist takes appropriate action to meet the goals. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Understanding/Coaching for Instruction and Assessment | | | | | |
| The school psychologist selects, develops and uses available assessments, to develop a clearer understanding of a student's areas of strength and growth during team meetings, including but not limited to an ETR meeting. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| The school psychologist analyzes patterns of data from all team members to help facilitate a productive and meaningful conversation to make the best possible team decision to support a student during the ETR process. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |

Cumulative Scoring

Needs Improvement 0 #DIV/0!
 Meets Expectations 0 #DIV/0!
 Exceeds Expectations 0 #DIV/0!

Evaluation Breakdown

Evaluator Signature _____ Date _____

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