

# Annual Summary Conference Form

For Principals and Assistant/Vice Principals Not Receiving a Median Student Growth Percentile (mSGP) Score

Date	Name	School	Assignment		Tenured (Y/N)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

### Practice Measures

### Student Achievement

### Summative Rating Scale

Practice Score* (50%)	SGO Score (10%)	Administrator Goals (40%)	Summative Rating
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Highly Effective	3.50 – 4.00
Effective	2.65 – 3.49
Partially Effective	1.85 – 2.64
Ineffective	1.00 – 1.85

### Practice Instrument

Using documentation (observation reports, principal self-reflection, etc.) and citing specific evidence, identify and discuss:

- 1-3 areas of strength
- 1-3 areas for improvement

### Evaluation Leadership Rubric\*

Using the *optional* state's Evaluation Leadership Rubric and citing specific evidence, identify and discuss:

- 1-3 areas of strength
- 1-3 areas for improvement

### Student Growth Objectives (Score is an average of teachers' SGO scores.)

Using completed SGO forms and supporting documentation (assessment results, etc.), discuss:

- Successes and challenges of SGO process
- Lessons from SGOs about teaching and student learning
- Steps to improve SGOs for next year

### Administrator Goals (Between 1 and 4 goals. The number is determined by the district.)

Using completed administrator goal forms, associated rubric and other supporting data and documentation, discuss:

- Successes and challenges of administrator goal setting process
- Lessons learned from administrator goals about school wide student success
- Steps to improve administrator goals for next year

### Professional Development Plan (PDP)

Using the current PDP, discuss strategies for improving performance next year, such as:

- Successes and challenges on this year's PDP
- Areas of professional development linked to information from evaluation
- Establish PD goals for the following year
- Components and implementation of a Corrective Action Plan if warranted (replaces PDP)

**Name**

**Signature**

**Date**

Principal/AP/VP

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Evaluator**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\*Includes observations and may include *optional* Evaluation Leadership Rubric

- |   |
|---|
| <input type="checkbox"/> Recommended for rehire (non-tenured)<br><input type="checkbox"/> Recommended for continued employment (tenured)<br><input type="checkbox"/> Placed on Corrective Action Plan |
|---|