



Form 412 – 3

TEACHER PROFESSIONAL GROWTH PLAN

(To be completed and discussed with Principal by October 31th)

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| Teacher: | School Year: |
| Years of Experience at Present School: | Years of Experience within GSSD: |

Current Teaching Assignment:

Professional area of growth which I am interested in pursuing this year:

Indicate your goal(s) related to the area of growth:

The following professional development opportunities exist to support teacher professional growth.
 To support the development of my professional growth for the current year, I am interested in the following opportunity.
 All areas need to be addressed at least once in the 6 year cycle.

| Date (Year) | Peer Observation Related to <i>Rtl, Tiered Instruction, Assessment, Flexible Groupings, Differentiated Instruction, Balanced Literacy or alternate as discussed with Administrator</i> | Self- Assessment Tool <i>Indicators of Responsive Teaching</i> | PD Inservice/ Conference connected to your school's LIP | School Administrator Formal Supervision | Other (as discussed with Administrator) <i>May include but not limited to: Book Study, Mentoring a 4 month Intern, Lead Learner Role in your school, etc.</i> | Formal Supervision by Superintendent of Education (mandatory by the end of Year 6) |
|----------------------------|--|---|--|---|--|--|
| Year 1 (School Year) | | | | | | |
| Year 2 (School Year) | | | | | | |
| Year 3 (School Year) | | | | | | |
| Year 4 (School Year) | | | | | | |
| Year 5 (School Year) | | | | | | |
| Year 6 (School Year) | | | | | | |

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| Resources required to support my goal(s): | |
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| Proposed action plan/strategies to achieve my goal(s): | |
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| Growth Experienced (provide tangible evidence) | |
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| Year End Reflection Points (To be discussed with Administrator by May 30th) | |
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| Teacher's Signature: | Date: |
| | |
| Principal's Signature: | Date: |
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This document should be saved in a professional portfolio for future conversations with your administrator and/or superintendent.