

PROVISO AREA FOR EXCEPTIONAL CHILDREN
PROCESS FOR FORMAL EVALUATION OF PROGRAM ASSISTANTS

PRE-OBSERVATION PROCESS

- A. The evaluator of each program assistant is the supervisor/principal.
- B. For the evaluation, the evaluator will ask for input from the supervising teacher.
- C. The preliminary explanation and discussion of the evaluation process and the evaluation form is presented to the staff within the first two (2) weeks of the beginning of the school year or within the first two (2) weeks of employment.
- D. Either the evaluator or program assistant may request to meet privately to discuss the evaluation process and related concerns.

FORMAL CLASSROOM OBSERVATIONS

- A. Classroom observations are conducted on an on-going basis by both the teacher and the supervisor/principal. There will be one (1) formal notified observation with feedback conducted by the supervisor/principal by March 15th.
- B. The program assistant will be notified one (1) day in advance of the observation time.

WRITTEN EVALUATION AND CONFERENCE

- A. Program assistants receive at least one (1) written evaluation per year by April 1st.
- B. The written evaluation will contain a checklist and a narrative to address areas of Communication, Job Management, and Behavior Management, in order to rate job performance in accordance with the job description of the program assistant.
- C. After the written evaluation is completed, the program assistant will be given a copy two (2) days prior to the meeting with the supervisor/principal.
- D. The evaluation conference includes discussion by the evaluator and the program assistant about all areas of the written evaluation. Any area in need of correction must be specifically noted as such and also accompanied by a plan of correction. This plan must include a long range goal, short term objective, criteria for achievement, and target date for attainment; it must be placed in the personnel file.
- E. At the conclusion of the evaluation conference, the written evaluation is signed by both parties. The program assistant indicates by signing whether or not he/she feels that the evaluation has been fair and just. If the program assistant refuses to sign, the supervisor/principal must make written notice of this fact. In either case, the program assistant receives a copy of the evaluation.
- F. The program assistant will have ten (10) school days to make written comments concerning the evaluation and have them attached to the final evaluation.
- G. The final evaluation, including additional comments, will then be reviewed by the Executive Director or Designee and placed in the program assistant's personnel file.

PROVISO AREA FOR EXCEPTIONAL CHILDREN
EVALUATION OF A PROGRAM ASSISTANT

Name: _____

0 – ABOVE 1 – AT 2 – BELOW 3 – NO BASIS

COMMUNICATION

0 1 2 3

1. Works well with related staff members. Comments:				
2. Works well with all students. Comments:				
3. Maintains a professional relationship with teachers, parents, colleagues, and administrators. Comments:				

COMMENTS:

JOB MANAGEMENT

0 1 2 3

1. Receives and demonstrates general knowledge of subject matter. Comments:				
2. Receives and demonstrates general knowledge of medical, physical, and emotional difficulty of students. Comments:				
3. Deals with each student appropriately. Comments:				
4. Exhibits sense of patience and fortitude. Comments:				
5. Willingly gives care to personal needs of all students. Comments:				
6. Assists teachers and therapists. Comments:				
7. Participates in school activities during normal school hours. Comments:				
8. Assists teachers and therapists in implementing goals as decided by the multidisciplinary team. Comments:				

COMMENTS:

PROVISO AREA FOR EXCEPTIONAL CHILDREN
EVALUATION OF A PROGRAM ASSISTANT

Name: _____

BEHAVIOR MANAGEMENT

	0	1	2	3
1. Supports the teacher in maintaining a positive class structure. Comments:				
2. Sets limits and effectively responds to problem behaviors as directed by the teacher. Comments:				

COMMENTS:

ADDITIONAL COMMENTS PERTAINING TO EVALUATION:

_____ Yes, I feel this is a fair and just evaluation.

_____ No, I do not feel this is a fair and just evaluation.

COMMENTS:

Signature of Program Assistant

Date

Additional comments submitted and attached _____ Yes _____ No Date _____

Signature of Evaluator

Date

Signature of Executive Director or Designee

Date