Name:	

School Year: _____

Goal:

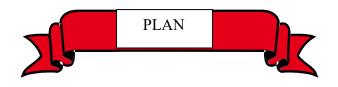
Strategies For Goal Achievement	Timelines	Colleagues/Mentors Comments				
Indicators and Measures of Goal Achievement:						

Name: _____

School Year:

Goal: _____

Strategies For Goal Achievement	Indicators and Measures of Achievement	Timelines	Colleagues/Mentors Comments



NAME:

SCHOOL YEAR:

1. Goal/Objective statement(s) developed in consultation with the employee's supervisor:

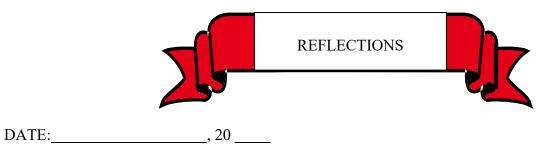
2. Relationship of said goal to job description:

3. Strategies for goal/objective achievement:

5. An estimated plan completion time:

6. Person(s) I will work with throughout my Growth Plan:

_



7. Have I successfully attained my goal(s) through completion of my plan?

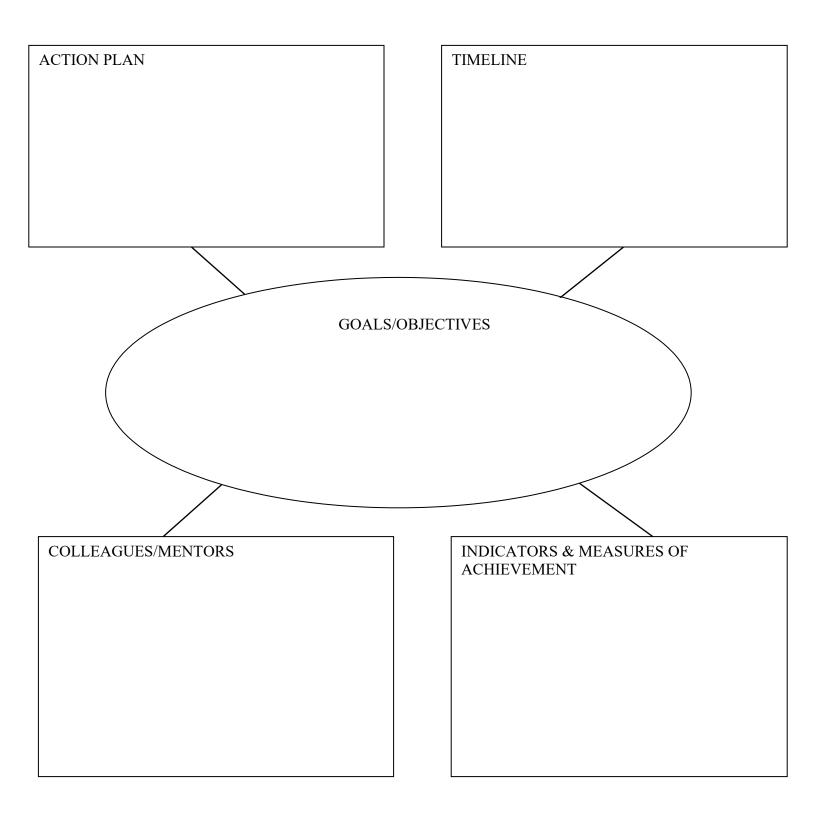
8. How my professional practices have improved:

9. How my Growth Plan has aided me personally:



NAME:

SCHOOL YEAR: _____





PROFESSIONAL GROWTH PLAN REPORT

Name:_____

School Year: _____

1. Have I successfully attained my goal(s) through completion of my action plan?

2. How have my professional practice been improved?