

LEBANON SPECIAL SCHOOL DISTRICT

PROFESSIONAL GROWTH PLAN

Educator Name _____ Work Site _____

SSN _____ Grade/Subject _____

*Choose an area for growth from Domains I-IV and design a Professional Growth Plan to **enhance** your development in this area.*

Focus for Growth: *State the Performance Standard.*

Rationale: *Why did you choose to enhance your growth in this area?*

Professional Growth Goal(s)/Objective(s) of this Plan: *State your professional growth goal(s)/objective(s) in measurable or observable terms. (Student objectives are not appropriate here, but may be stated in the **Expected Benefits** section.)*

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Action Plan: *Describe the actions you plan to take to accomplish this goal(s)/objective(s), including **timelines for completion of each action**. If working collaboratively, identify the role of each participant. (What will you do to increase your knowledge in accomplishing your professional growth goal(s)/objective(s)?)*

Evaluation Methods and Criteria: *Describe the methods and criteria you **plan** to use to evaluate your attainment of this goal(s)/objective(s). (What will be your indicators of success?)*

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Expected Benefits: *Describe the educational benefits you **expect** to accrue as a result of your implementation of this Professional Growth Plan. (Student objectives are appropriate to discuss here.)*

The Professional Growth Plan stated above has been reviewed and is appropriate for implementation beginning with the school year _____.

Educator's Signature

Date

Evaluator's Signature

Date

**PROFESSIONAL GROWTH PLAN
IMPLEMENTATION SUMMARY**

Modifications/Adjustments to the Plan:

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SSN:

Evaluation Results: *Describe the results **obtained** from your evaluation.*

Effects on Students' Learning: *Describe the impact on student performance derived from your implementation of this Professional Development Plan.*

I verify that I personally engaged in these activities and that all the information contained in this plan is accurate.

Educator's Signature

Date