**NEVADA EDUCATOR PERFORMANCE FRAMEWORK**

**2018-2019 ADMINISTRATOR EVALUATION SUMMATIVE RATING TOOL**

**EDUCATIONAL PRACTICE ONLY**

*Pursuant to NRS 391.715 student performance measures are not to be included in the evaluation of building administrators in their initial year of probation or for post-probationary or probationary teachers at a turnaround school in its first two years of turnaround status. Turnaround school is defined as a school that has been determined to be turnaround pursuant to NRS 388G.400 only.*

|  |  |
| --- | --- |
| Administrator Name: Click here to enter text. | School Name: Click here to enter text. |
| Date: Click here to enter a date. | Evaluator: Click here to enter text. |
| Position Title: Click here to enter text. |  |
| Dates of Observations: Click here to enter text. | Dates of Conferences: Click here to enter text. |

# SECTION 1: Domain Scores

*Use the rubrics and evidence recorded throughout the cycle for determining performance levels (1-4 whole numbers only).*

**Instructions:** To insert scores, double click the table below to allow access to the embedded Excel spreadsheet.

****

# SECTION 2: Summary of Evidence

**I,** Click here to enter text.**, have received a copy of the signed observation notes which identifies two required pieces of evidence for each Indicator, as well as evidence toward my Student Learning Goal and Professional**

**Practice Goal.**

(administrator signature)

# SECTION 3: Narrative and Final Rating

|  |
| --- |
| **Instructional Leadership and Professional Responsibilities Strengths/Areas for Growth and Evidence*** For all administrators, list any performance strengths.
* For all administrators with the summative rating of Ineffective, Developing, or Effective, include any areas for growth.
* For administrators earning the Performance Levels of 1 or 2 for any Instructional Leadership or Professional Responsibilities Indicators, list the directions from the pre-/post-observation conference notes or the observation evidence tool already issued.
* If a schoolwide goal(s) is determined, list the goal(s) for all administrators.
 |
| Click here to enter text. |

|  |
| --- |
| **Professional Practice Goal Progress*** Include a statement regarding the progress of the Professional Practice Goal.
 |
| Click here to enter text. |

# Score Ranges

|  |  |
| --- | --- |
| **Overall Score Range** | **Final Rating** |
| TBD | Highly Effective |
| TBD | Effective |
| TBD | Developing |
| TBD | Ineffective |

**Final Rating (from above):** Select an item.

**Administrator Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Evaluator Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**