JEFFERSON COUNTY PUBLIC SCHOOLS

PRINCIPAL/ASSISTANT PRINCIPAL

END-OF-YEAR REFLECTION

|  |  |  |  |
| --- | --- | --- | --- |
| **NAME:** |  | **DATE:** |  |
| **ID #:** |  | **LOCATION NAME:** |  |
| **SUPERVISOR/EVALUATOR:** |  |

**Summative Reflection:** *Complete this section at the end of the year to describe the level of attainment for each goal within the Professional Growth Plan.*

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| --- | --- |
| **Date:** | **End of Year Student Progress Goal Reflection** |
| **End-of-Year Data Results** (Accomplishments at the end of year.) | [ ]  Data attached |
| **Date:** | **End of Year Working Conditions Goal Reflection:** |
|  |  |
| **Date:** | **End of Year Professional Growth Goal Reflection:** |
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| **Next Steps:** |
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| --- | --- |
| **Employee’s Signature:** | **Date:** |
| **Evaluator’s Signature:** | **Date:** |