Other Academic Measure Based on Recommended Procedures

Teacher/Leader's Name		Position	School Year
School District	5	School	
PART A: To be completed within	the first nine-weeks of	STEP 5: Es	tablish a 5-Point Rating Scale
school or as set by district policy.		5	
STEP 1: Identify an Academic Area of focus STEP 2: Identify the Pre-Assessment chosen and results of the Pre-Assessment		4	
		3	
		2	
		1	
		Date Completed	
		Educator's Signat	ure
STEP 3: Select an Other Academ	ic Measure	Administrator's Si	gnature
Check One or more than one if allowed by district policy)	Identify Specific Selection	*Signatures indicate that the educator and administrator agree to the goal and 5-point rating scale that will be used in the final evaluation.	
State Assessments			
Value-Added Model (VAM) score		PART B: To be completed at the end of the school year o after instruction in the academic area of focus is complete	
"Off the Shelf" Assessments		STEP 6: Evaluation	
A-F Report Card Components		MAQ	Evidence or
Surveys		Rating Score	Comments
Student Competition			
Miscellaneous			
Other (Only allowable if there are not two options on the Approved OAM List that are relevant to the job duties of the educator)		Date Completed	
TEP 4: Establish a SWART Goal		Educator' Signature	
		Administrator's Sign	ature
		*Signatures Indica findings of the ra	te that the educator and administrator agree to the factual ting assigned.