

# NICE COMMUNITY SCHOOL DISTRICT ANNUAL TEACHER GOALS

*This form is to be completed by each teacher and submitted to the Principal by Oct. 1<sup>st</sup> of each school year.*

<b>Name of Teacher:</b>	
<b>School:</b>	
<b>Grade Level/Subject(s):</b>	

## **GOALS & OBJECTIVE(S)**

What are the teacher's objectives as related to the school improvement goals?

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## **STRATEGIES**

What specific research-based strategies will the teacher use to achieve these objectives?

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## **MEASUREMENT**

How will the teacher measure the successful attainment of these objectives?

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## **EVIDENCE & TARGET GOALS**

What evidence will the teacher produce to illustrate the extent to which these target goals were met?

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**SUPPORT**

What support might be needed from the principal/superintendent?

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**DISCUSSION/ SUMMARY**

To what extent were target goals met in order to further student achievement?

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**PROFESSIONAL DEVELOPMENT**

What professional development/training is required in order to maximize success in the coming year?

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Evidence will need to be gathered in all student growth areas. However, there might be specific components where additional feedback is requested. Which specific areas would you like the evaluator to provide feedback?

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