

**ADDENDUM G-S
MADERA UNIFIED SCHOOL DISTRICT
TSA: Site Academic Coach Goals
Initial Conference Agreement**

Name: _____ Date: _____

Permanent or Probationary (circle one) 1st 2nd Other: _____ Position: _____

1. Curriculum Support

- 1A. Supports teachers in design, implementation and evaluation of curriculum for all core subject areas.
- 1B. Collaborates in subject level PLCs to design units around the curriculum.

2. Instructional Support

- 2A. Supports teachers in organizing instruction, lesson designing, and instructional delivery
- 2B. Conducts classroom demonstration lessons
- 2C. Provides differentiated instructional strategies and instructional materials for use in diverse classrooms.
- 2D. Provides teachers with opportunities to stay current with “BEST Practices” in instruction.

3. Assessment and Evaluation

- 3A. Collaborates with teachers to provide support in the analysis of data from assessment results.
- 3B. Provides support in the development of assessments.
- 3C. Provides multiple sources of data, including assessments, to promote the needs of the school.

4. Professional Development:

- 4A. Provides professional development opportunities that supports the sites initiatives.
- 4B. Collaborates in planning and promoting professional development activities.
- 4c. Maintains professional competence through participation in professional development activities as provided by district, county, state and other consultants.

Understanding that the evaluation process reflects all standards above, please select two to three standards upon which you will focus this year. Choose one or more elements for each standard.

I. Goal Number One

1. Standard: _____

Element(s): _____

2. Please describe your personal goal(s) and implementation plan related to this standard.

3. How will your attainment of this goal be evaluated?

II. Goal Number Two

1. Standard: _____

Element(s): _____

2. Please describe your personal goal(s) and implementation plan related to this standard.

3. How will your attainment of this goal be evaluated?

III. Goal Number Three (optional)

1. Standard: _____

Element(s): _____

2. Please describe your personal goal(s) and implementation plan related to this standard.

3. How will your attainment of this goal be evaluated?

IV. How can your administrator support you in meeting your identified standards (e.g. staff development, peer observation time, resources)?

Date

Teacher's Signature

Date

Supervisor's Signature

This agreement may be modified by mutual consent at any time during the school year. A copy of this plan will be kept in the Supervisor's office.

Original: Evaluatee
Copy: Evaluator