**Marion County Special**

**Education Cooperative**

**Paraeducator Evaluation**

**Name**

**Supervisor**

**District**

**Date**

**MARION COUNTY SPECIAL EDUCATION COOPERATIVE #617**

**1500 E Lawrence**

**Marion, KS 66861**

**620-382-2858**

**MARION COUNTY SPECIAL EDUCATION COOPERATIVE #617**

**PARAEDUCATOR EVALUATION**

Marion County Special Education Cooperative policy states that all paraeducators are required to go through an evaluation process annually.

**Paraeducators**  - One evaluation is required per school year and shall be completed by the supervisor by **April 1**. Exceptions may be made for paras hired during the school year.

The supervising teacher has the prerogative to evaluate the para more than required if concerns arise.

**DEFINITION OF TERMS**

**Exemplary** – Consistently goes above and beyond normal expectations, is a role model for others in all areas, attitude and skills as seldom seen in paraeducators.

**Commendable** – Is obviously gratified by work, definitely doing the job, does more than asked within job description, takes some initiative, attitude and skills are a resource for others.

**Acceptable** – Doing what is asked, positive outlook, seeks to improve.

**Improvement Needed** – Attitude and skills are not helping student progress. (Needs to be made aware of the weakness and given a chance to learn and grow)

**Immediate Improvement Must Be Demonstrated** – Skills and/or attitude are detrimental to student progress. (Behavior must not reoccur)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **MEETS EXPECTATIONS** | | | **PERFORMANCE NOT ACCEPTABLE** | |
|  | | | **(Provide explanation on pg. 4)** | |
| **Demonstration of Job Skills** | **Exemplary** | **Commendable** | **Acceptable** | **Improvement needed** | **Immediate Improvement must be demonstrated by (insert date on line)** |
| Job Knowledge |  |  |  |  |  |
| Quality of Work |  |  |  |  |  |
| Sees work to completion |  |  |  |  |  |
| Uses time wisely |  |  |  |  |  |
| Behavior management skills |  |  |  |  |  |
| Academic skills; reading math, other |  |  |  |  |  |
| Uses technology available |  |  |  |  |  |
| **Assistance to Students** |  |  |  |  |  |
| Differentiates between students learning the skills and merely completing the work |  |  |  |  |  |
| Promotes student’s internal motivation and behavior controls |  |  |  |  |  |
| **Job Responsibility** | **Exemplary** | **Commendable** | **Acceptable** | **Improvement Needed** | **Immediate Improvement must be demonstrated by (insert Date on line)** |
| Work organization |  |  |  |  |  |
| Care of equipment |  |  |  |  |  |
| Follows directions |  |  |  |  |  |
| Judgment & common sense |  |  |  |  |  |
| Accepts responsibility |  |  |  |  |  |
| Demonstrates initiative |  |  |  |  |  |
| **MCSEC Policies/Practices** |  |  |  |  |  |
| Confidentiality requirements met at school & in public |  |  |  |  |  |
| Speaks positively about special education |  |  |  |  |  |
| Speaks positively about education in general |  |  |  |  |  |
| Speaks positively about staff members |  |  |  |  |  |
| Speaks positively regarding students |  |  |  |  |  |
| **Relating With Others** |  |  |  |  |  |
| Relationships with co-workers: |  |  |  |  |  |
| Works Cooperatively |  |  |  |  |  |
| Carries share of work load |  |  |  |  |  |
| Relationships with supervision: |  |  |  |  |  |
| Accepts direction |  |  |  |  |  |
| Accepts redirection |  |  |  |  |  |
| Asks for help when needed |  |  |  |  |  |
| Asks questions appropriately |  |  |  |  |  |
| Relationships with students: |  |  |  |  |  |
| Approachable & friendly |  |  |  |  |  |
| Maintains respect for students |  |  |  |  |  |
| Earns respect from students |  |  |  |  |  |
| Accepting of others and their ideas |  |  |  |  |  |
| **Maintains Professionalism** |  |  |  |  |  |
| With supervisor |  |  |  |  |  |
| With co-workers |  |  |  |  |  |
| With students |  |  |  |  |  |
| With parents |  |  |  |  |  |
| With the public |  |  |  |  |  |
| **Personal Attributes** |  |  |  |  |  |
| Appearance |  |  |  |  |  |
| Dependability |  |  |  |  |  |
| Loyalty |  |  |  |  |  |
| Attitude toward job |  |  |  |  |  |
| Attendance |  |  |  |  |  |
| Punctuality |  |  |  |  |  |

Evaluator’s Summary of Paraeducator’s Performance: This space must be used by the evaluator to comment in regard to evaluation areas marked less than acceptable. For any concerns marked in “Performance not Acceptable” area identify steps to be taken to improve performance to an acceptable level and the appropriate time frame.

Employee Comments: This space may be used by the employee to comment in regard to the evaluation given above or to other aspects of performance as needed. If employee requires additional time to respond, please so note in this space and submit response to Director within 10 days. Evaluator will be made aware of the employee response.

(Attach additional pages if needed)

**NOTE:** The employee is to sign this document. The employee’s signature on this report does not represent agreement with the evaluation. Signatures indicate only that the employee has reviewed this form in conference with the evaluator.

Evaluator Signature Date

Employee Signature Date

Is conference requested with the Director? YES NO (Conference may be required by the Director)

The supervising teacher shall insure that the building principal has the opportunity to participate in this evaluation as will be indicated by the principal’s signature below.

**Building Principal’s Comments**:

Building Principal Signature Date