AIDE, SPECIAL EDUCATION EARLY CHILDHOOD COMMUNICATION
Summative Appraisal Form

Name _____ Location _____

Appraisal Period: From _____ to _____ Date of Review _____

Directions

The following statements describe the administrator who achieves success. Based on cumulative performance information, the evaluator estimates the administrator's effectiveness in meeting each criterion. Rate each criterion using the scale below that most closely describes the administrator's attainment of that criterion. For each domain, a comment area is provided for general statements and/or recommendations.

Rating Scale

5	**Clearly Outstanding:**	Performance is consistently far superior to what is normally expected.
4	**Exceeds Expectations:**	Performance demonstrates increased proficiency and is consistently above expectations.
3	**Meets Expectations:**	Performance meets expectations and presents no significant problems.
2	**Below Expectations:**	Performance is consistently below expectations and significant problems exist.
1	**Unsatisfactory:**	Performance is consistently unacceptable.
0	**Not Applicable**	

JOB PERFORMANCE STATEMENTS

INSTRUCTIONAL SUPPORT

_____ 1. Assists students with physical disabilities receiving speech therapy services according to their needs, including transferring to and from wheelchairs, lifting, or positioning.

_____ 2. Assists students with physical needs and personal care, including feeding, bathroom needs, and personal hygiene.

_____ 3. Helps manage behavior of students. This includes intervening in crisis situations and assisting with disruptive or dangerous student behavior as needed.

_____ 4. Assumes responsibility for learning and adapting to each student's special medical, physical, communicative, and emotional needs.

_____ 5. Works with individual students or small groups to develop motor skills and conducts instructional exercises assigned by Speech Language Pathologist/Speech Language Pathologist Assistant.

_____ 6. Keeps Speech Language Pathologist/Speech Language Pathologist Assistant informed of special needs or problems of individual students.

_____ 7. Supervises children during play periods and transitions to ensure their safety.

_____ 8. Assists in the maintaining of individual student records.

_____ 9. Escorts or assists children in general education classes and/or specialized classes, as needed.

_____ 10. Participates in daily and long-range lesson and classroom activity planning.

COMMENTS: _____

_____

OTHER

_____ 11. Helsp Speech Language Pathologist/Speech Language Pathologist Assistant prepare instructional materials and classroom displays.

_____ 12. Helps maintain a clean, neat and orderly room.

_____ 13. Helps Speech Language Pathologist/Speech Language Pathologist Assistant keep administrative records and prepares required reports.

_____ 14. Serves as interpreter between the Speech Language Pathologist/Speech Language Pathologist Assistant and Spanish-speaking parents as needed

_____ 15. Participates in staff development training programs, faculty meetings, and special events as assigned.

_____ 16. Assists students with Special Education transportation assigned by a Special Education Administrator.

_____ 17. Performs other duties assigned by supervisor.

_____ 18. Maintains confidentiality of information.

COMMENTS: _____

_____

What strengths does _____ possess?

_____

_____

_____

What are some improvements_____can make to ensure a higher degree of success for students on this campus/department?

_____

_____

_____

Summative Conference Comments:

_____

_____

_____

_____

Recommendation of Evaluator: I have read and received a copy of this evaluation. I have reviewed this instrument.

_____Renewal and/or Extension of Assignment

_____Non-renewal of Assignment

_____Termination of Assignment

_____Non-extension of Assignment

_____ _____
Administrator (Print Name) Date

_____ _____
Administrator (Signature) Date

_____ _____
Employee's Signature Date