

Referral for Teacher Remediation

(PLEASE PRINT)

Name _____ Empl. ID# _____ Phone _____

School _____ Assignment _____

Date of Referral _____ Supervisor _____

The category(ies) and reason(s) for remediation identified below are based on specific standards and indicators of teaching effectiveness (Utah Effective Teaching Standards). It is understood that areas identified under a category may change if data gathered during the remediation indicates different reasons may be responsible for problems in a given category.

<u>Standard #</u>	<u>Indicator #</u>	<u>Descriptor</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Report prepared by:

Administrator Signature _____ Date _____

Teacher Signature _____ Date _____

(Does not imply agreement)

Remediation Plan Template

GOAL(S) OF PLAN

As related to specific indicator(s) in the Standards(s) as they relate to the area of concern as evidenced in the Administrator Monitoring Report.

STRATEGIES TO ACCOMPLISH GOAL(S)

TIMELINE WITH PERIODIC REVIEW DATES OF PROGRESS

RESOURCES AVAILABLE

OBSERVABLE OUTCOMES

ACKNOWLEDGEMENT

Teacher's signature
(Signature indicates the teacher has read and is familiar with the Remediation Plan)

Date

Administrator's signature

Date

Remediation Plan Outcome

TEACHER INFORMATION

Teacher Name

School

Date

PLAN OUTCOMES

Date plan developed

Date plan completed

RECOMMENDATION OF ADMINISTRATOR

- Teacher has successfully completed the goal(s) of the plan and will return to an **E** (Effective) rating. **The teacher must maintain effective performance for 3 (three) years or will be *moved immediately to remediation*.**
- Teacher has not satisfactorily completed the goal(s) of the Remediation Plan. The following recommendation is made:

- Teacher has not satisfactorily completed the goal(s) of the Remediation Plan. Recommend dismissal/non-renewal .

ACKNOWLEDGEMENT

Teacher's signature

Date

Administrator's signature

Date