**Teacher Appraisal Form Online**

### **Teacher Information**

**Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Position:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Department:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Self-Assessment**

* **Describe your teaching methodologies and how they support student learning:**
* **List the professional development activities you've participated in over the past year:**
* **Identify areas of your teaching you'd like to improve and your plan for doing so:**

**Performance Criteria**

**Please rate the following aspects of your teaching on a scale from 1 (Needs Improvement) to 5 (Outstanding).**

**1. Lesson Planning and Preparation**

* **Clarity of objectives: \_\_\_**
* **Relevance of materials: \_\_\_**
* **Adaptability to students' needs: \_\_\_**

**2. Classroom Management**

* **Effectiveness of classroom environment: \_\_\_**
* **Student engagement techniques: \_\_\_**
* **Handling of disruptions: \_\_\_**

**3. Delivery of Instruction**

* **Clarity and accuracy of content delivery: \_\_\_**
* **Use of engaging teaching methods: \_\_\_**
* **Encouragement of student participation: \_\_\_**

**4. Assessment of Students**

* **Fairness and transparency of assessments: \_\_\_**
* **Timeliness of feedback: \_\_\_**
* **Usefulness of feedback in promoting student learning: \_\_\_**

**5. Professionalism**

* **Collaboration with colleagues: \_\_\_**
* **Communication with parents: \_\_\_**
* **Commitment to continuous learning: \_\_\_**

**Goals for Next Evaluation Period**

**1. Short-term Goals:**

**2. Long-term Goals:**

**Administrator's Evaluation**

**Comments on Performance:**

**Recommendations for Professional Development:**

**Overall Rating:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Evaluator's Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Teacher's Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Evaluator's Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_