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| Educator Name: | Click here to enter text. |
| Subjects(s): | Click here to enter text. | Grade Level(s): | Click here to enter text. |
| Administrator Name: | Click here to enter text. | School/Location: | Click here to enter text. |
| First Formal Observation Date(s) |
| Pre-Observation: | Click here to enter a date. |
| Observation (30 minutes): | Click here to enter a date. |
| Post-Observation: | Click here to enter a date. |
| If non-tenured: Second Formal Ovservation |
| Pre-Observation: | Click here to enter a date. |
| Observation (30 minutes): | Click here to enter a date. |
| Post-Observation: | Click here to enter a date. |
|  |
| **Domain 2: The Environment** |
| Component 2d: *Establishing standards of conduct in the treatment center* |
| Observations: |
| **Domain 3: Delivery of Service** |
| Component 3b: *Developing and implementing treatment plans to maximize students’ success* |
| Component 3d: *Collecting information; writing reports* |
| Component 3e: *Demonstrating flexibility and responsiveness* |
| Observations: |