Progressive Improvement Plan Form NAME: ______SCHOOL: _____ GRADE LEVEL: SUBJECT(S): CURRENT TRACK:

GRAD	DE LEVEL:	SUBJECT(S):	CURRENT TRACK:	
			DATE:	
		NOTIFICATION DATE:		
CONC	ERN CONFEREN	ICE DATE:		
regard	ing your job perfor		ness Plan, this document is notifying you the your administrative supervisor, with the renamerovement Plan.	
The fo	llowing plan is to b	be developed by the administra	tive supervisor in collaboration with the edu	icator.
Time I	Period of Plan:	Final Evaluation C	Conference Date:	
INTER	RIM SUPERVISIO	N CONFERENCE DATES: _		
		N (including a <u>list of attached of</u>		
Educa	tor Signature		Date	
Admir	nistrator Signature		Date	
		does not signify agreement or disagred it has been reviewed with the admir	eement with the content of this Progressive Improventistrator.	nent Plan, but
•	This improvemen	t plan has been developed by t	he administrative supervisor in collaboration	n with the
	educator:	(educator's initials)	(administrator's initials)	
•		e post-observation conference	itional concerns, the administrative supervis and document further steps in the Improver	
•		uld consider this Progressive I endation for non-renewal. Edu	mprovement Plan documentation to be notificator initials:	fication of
Impro	vement Plan Com	pletion:		
0	This plan was cor	npleted successfully on or before	ore the designated completion date.	
0	This plan was not continue to be of		designated completion date. The componer	nt(s) that

Educator Signature	Date
Administrator Signature	Date

The signature of the educator does not signify agreement or disagreement with the content of this Progressive Improvement Plan, but only that he/she has seen it and it has been reviewed with the administrator.