



Professional Growth Plan

School Session:

LEA:

School:

Employee Name:

Goal of :

- ☐ Planning and Preparation
- ☐ The Classroom Environment
- ☐ Instruction

	Action Steps	Resources Needed	Target Date
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			

Beginning of Year		End of Year	
Employee Comments:		Employee Comments:	
Signature	Date	Signature	Date
Evaluator Comments:		Evaluator Comments:	
Signature	Date	Signature	Date