Central Consolidated School District ~ Human Resources Department PROFESSIONAL DEVELOPMENT PLAN (PDP) for NON-CERTIFIED EMPLOYEES

| School Year | |
|----------------|------|
| Due October 12 | 2022 |

| PART 1: EMPLOYEE & EVALUATOR | R(s) INFORMATION [to be completed by the primary evaluator] | |
|---|--|--------------------|
| Name: | Position: | |
| Primary Evaluator: | School / Location: | |
| This employee works in multiple | e locations and has more than one evaluator. Secondary evaluator information | is listed below. |
| Secondary Evaluator: | School / Location: | |
| PART 2: DEPARTMENT GOAL FOR | THE CURRENT SCHOOL YEAR: [to be completed by the evaluator(s)] | |
| | (,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| | | |
| PART 3: EMPLOYEE GOAL(S) FOR T | THE CURRENT SCHOOL YEAR [to be completed by the employee in collaboration v | with evaluator(s)] |
| A SMART goal answers the ques | stions of WHO? will do WHAT? by WHEN? and HOW? will I know it is co | ompleted? |
| - | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| - | | |
| | | |
| | | |
| PART 4: ACKNOWLEDGEMENT & A | AGREEMENT [to be read and signed by evaluator(s) & employee] | |
| Mv supervisor(s)/evaluate | itor(s) have reviewed the department goal(s) with me. | |
| | al development goals are aligned with the department goals and objecti | ves |
| | | |
| My immediate superviso | or(s)/evaluator(s) and I understand and agree with the stated goals outli | ned above. |
| | | |
| | Signature of Employee | Date |
| | - Samuel Company of | |
| | | |
| Sign | nature of Primary Evaluator | Date |
| | | |
| | | |
| Signature of | f Secondary Evaluator (if applicable) | Date |