

APPENDIX

TEACHER JOB DESCRIPTION

Position Title: Classroom Teacher

Qualifications:

Valid Georgia professional certification in the assigned teaching field

Reports to:

Building Principal and/or other authorized administrators

Teaching Tasks:

- I. Provides Instruction
 - A. Teaches at an appropriate instructional level
 - B. Provides content development
 1. Provides teacher-focused content development
 2. Provides student-focused content development
 - C. Builds for transfer
 1. Provides initial focus
 2. Provides content emphasis and linking
 3. Provides lesson summaries
- II. Assesses and Encourages Student Progress
 - A. Promotes student engagement
 - B. Monitors student progress
 - C. Responds to student performance
 1. Responds to adequate performances
 2. Responds to inadequate performances
 - D. Supports students
- III. Manages the Learning Environment
 - A. Uses time efficiently
 1. Handles non-instructional tasks efficiently
 2. Uses instructional time appropriately
 - B. Maintains effective physical setting for instruction
 - C. Maintains appropriate student behavior in the classroom
 1. Monitors behavior
 2. Intervenes when necessary

Teacher Job Description (continued)

General Duties and Responsibilities:

I. Teacher Duties and Responsibilities

- A. Follows professional practices consistent with school and system policies in working with students, students' records, parents, and colleagues
 - 1. Interacts in a professional manner with students and parents
 - 2. Is available to students and parents for conferences according to system policies
 - 3. Facilitates home-school communication by such means as holding conferences, telephoning, and sending written communications
 - 4. Maintains confidentiality of students and students' records
 - 5. Works cooperatively with school administrators, special support personnel, colleagues, and parents
- B. Complies with school, system, and state administrative regulations and board of education policies
 - 1. Conducts assigned classes at the times scheduled
 - 2. Enforces regulations concerning student conduct and discipline
 - 3. Is punctual
 - 4. Provides adequate information, plans, and materials for substitute teacher
 - 5. Maintains accurate, complete, and appropriate records and files reports promptly
 - 6. Attends and participates in faculty meetings and other assigned meetings and activities according to school policy
 - 7. Complies with conditions as stated in contract
- C. Demonstrates professional practices in teaching
 - 1. Models correct use of language, oral and written
 - 2. Demonstrates accurate and up-to-date knowledge of content
 - 3. Implements designated curriculum
 - 4. Maintains lesson plans as required by school policy
 - 5. Assigns reasonable tasks and homework to students
- D. Acts in a professional manner and assumes responsibility for the total school program, its safety and good order
 - 1. Takes precautions to protect records, equipment, materials, and facilities
 - 2. Assumes responsibility for supervising students in out-of-class settings

II. Duties and Responsibilities, Prescribed by Local School and System (Optional)

- A. _____
- B. _____
- C. _____

III. Professional Development Plan

APA Rule 160-5-1-.26 JOB DESCRIPTIONS FOR CERTIFIED PERSONNEL
(This rule shall become effective beginning the 1993-94 school year.)

STANDARD PROCESS
CONFIDENTIAL GTOI OBSERVATION RECORD: STANDARD FORM
 (Refer to back for instructions)

Teacher's Name _____										System _____			School _____		
Teacher's System State Code	Teacher's School State Code	Last 4 Digits Teacher SSN	Last 4 Digits Observer SSN	Date			Observation Number	Beginning Time: _____	Ending Time: _____	Total Minutes	Lesson Segment (Circle One) B M E O				
				MO	DAY	YR									
Focus of Lesson: _____															
MARK SCORES FOR EACH DIMENSION															
TEACHING TASK I: PROVIDES INSTRUCTION Comments: _____							A. Instructional Level					(N) (S)			
							B. Content Development								
							1. Teacher-Focused					(N) (S)			
							and/or					and/or			
							2. Student-Focused					(N) (S)			
							C. Building for Transfer					(M) (S) (NA)			
TEACHING TASK II: ASSESSES AND ENCOURAGES STUDENT PROGRESS Comments: _____							A. Promoting Engagement					(M) (S)			
							B. Monitoring Progress					(N) (S)			
							C. Responding to Student Performance					(M) (S)			
							D. Supporting Students					(N) (S)			
TEACHING TASK III: MANAGES THE LEARNING ENVIRONMENT Comments: _____							A. Use of Time					(M) (S)			
							B. Physical Setting					(M) (S)			
							C. Appropriate Behavior					(N) (S)			

(SIGNATURES)

OBSERVER: _____ DATE _____ POSITION: _____

Sign and return copy to principal's office. Signature acknowledges receipt of form, not necessarily concurrence. Written comments may be provided and/or attached. Initial and date here if comments are attached.

TEACHER: _____ DATE _____

Teacher's Comments: _____

GENERAL INSTRUCTIONS

- For scoring section that is to be bubbled, use pencil or ball point pen.
- Comments and other information may be typed or written in pencil or ball point pen.
- Erase completely any marks you wish to change.
- Make no stray marks on the last copy.
- Do not fold or staple the last copy.

CODING INSTRUCTIONS

Record teacher's name, system, and school at the top of the form. Record beginning and ending time and notes on the focus of the lesson.

TEACHER'S SYSTEM STATE CODE: Enter the three digit state code for the teacher's system
(Example - Appling County 601).

TEACHER'S SCHOOL STATE CODE: Enter the four digit state code for the teacher's school
(Example - Altamaha 1050).

LAST 4 DIGITS TEACHER SSN: Enter the last four digits of the teacher's social security number.
(Example - If teacher's SSN is 987-65-4321, enter 4321.)

LAST 4 DIGITS OBSERVER SSN: Enter the last four digits of the observer's social security number.
(Example - If the observer's SSN is 123-45-6789, enter 6789.)

DATE: Enter the numerical date (month, day, and year) of the observation (Example - 10-04-93).

OBSERVATION NUMBER: Enter the number of this observation. (Example - If this is the teacher's second observation in the Standard Process, enter the number 2.)

TOTAL MINUTES: Enter the two digit number corresponding to the total number of minutes the teacher was observed
(Example - 20 or 35).

LESSON SEGMENT: Circle the letter corresponding to the segment of the lesson observed. (Examples: If the observation included the **beginning** of the teacher's lesson, circle the letter B. If the observation included the **middle** but neither the beginning nor the end of a lesson, circle the letter M. If the observation included the **end** of the lesson, circle the letter E. If the observation included the **end** of one lesson and the **beginning** of another, circle the letter Q.)

SCORING DIRECTIONS

Darken the bubble which corresponds to the score for each dimension or subdimension.

Use the following key in marking your scoring decisions:

NI = Needs Improvement
S = Satisfactory
NA = Not Applicable

PROCESSING DIRECTIONS

Forward the second copy to your system contact person to be mailed to:

Performance Assessment Laboratory
University of Georgia
115 Sycamore Drive
Athens, GA 30602-9101

FORMATIVE PROCESS
CONFIDENTIAL GTOI OBSERVATION RECORD: STANDARD FORM
 (Refer to back for instructions)

Teacher's Name _____										System _____			School _____						
Teacher's System State Code		Teacher's School State Code		Last 4 Digits Teacher SSN		Last 4 Digits Observer SSN		Date MO DAY YR			Beginning Time: _____			Total Minutes		Lesson Segment (Circle One) B M E O			
											Ending Time: _____								
Focus of Lesson: _____																			
MARK SCORES FOR EACH DIMENSION																			
TEACHING TASK I: PROVIDES INSTRUCTION												A. Instructional Level						<input type="radio"/> N <input type="radio"/> S	
Comments: _____												B. Content Development							
_____												1. Teacher-Focused						<input type="radio"/> N <input type="radio"/> S	
_____												and/or						and/or	
_____												2. Student-Focused						<input type="radio"/> N <input type="radio"/> S	
_____												C. Building for Transfer						<input type="radio"/> N <input type="radio"/> S <input type="radio"/> NA	
TEACHING TASK II: ASSESSES AND ENCOURAGES STUDENT PROGRESS												A. Promoting Engagement						<input type="radio"/> N <input type="radio"/> S	
Comments: _____												B. Monitoring Progress						<input type="radio"/> N <input type="radio"/> S	
_____												C. Responding to Student Performance						<input type="radio"/> N <input type="radio"/> S	
_____												D. Supporting Students						<input type="radio"/> N <input type="radio"/> S	
TEACHING TASK III: MANAGES THE LEARNING ENVIRONMENT												A. Use of Time						<input type="radio"/> N <input type="radio"/> S	
Comments: _____												B. Physical Setting						<input type="radio"/> N <input type="radio"/> S	
_____												C. Appropriate Behavior						<input type="radio"/> N <input type="radio"/> S	

(SIGNATURES)

OBSERVER: _____ DATE _____ POSITION: _____

Sign and return copy to principal's office. Signature acknowledges receipt of form, not necessarily concurrence. Written comments may be provided and/or attached. Initial and date here if comments are attached.

TEACHER: _____ DATE _____

Teacher's Comments: _____

GENERAL INSTRUCTIONS

- For scoring section that is to be bubbled, use pencil or ball point pen.
- Comments and other information may be typed or written in pencil or ball point pen.
- Erase completely any marks you wish to change.
- Make no stray marks on the last copy.
- Do not fold or staple the last copy.

CODING INSTRUCTIONS

Record teacher's name, system, and school at the top of the form. Record beginning and ending time and notes on the focus of the lesson.

TEACHER'S SYSTEM STATE CODE: Enter the three digit state code for the teacher's system
(Example - Appling County 601).

TEACHER'S SCHOOL STATE CODE: Enter the four digit state code for the teacher's school
(Example - Altamaha 1050).

LAST 4 DIGITS TEACHER SSN: Enter the last four digits of the teacher's social security number.
(Example - If teacher's SSN is 987-65-4321, enter 4321.)

LAST 4 DIGITS OBSERVER SSN: Enter the last four digits of the observer's social security number.
(Example - If the observer's SSN is 123-45-6789, enter 6789.)

DATE: Enter the numerical date (month, day, and year) of the observation (Example - 10-04-93).

TOTAL MINUTES: Enter the two digit number corresponding to the total number of minutes the teacher was observed
(Example - 20 or 35).

LESSON SEGMENT: Circle the letter corresponding to the segment of the lesson observed. (Examples: If the observation included the **beginning** of the teacher's lesson, circle the letter **B**. If the observation included the **middle** but neither the beginning nor the end of a lesson, circle the letter **M**. If the observation included the **end** of the lesson, circle the letter **E**. If the observation included the **end** of one lesson and the **beginning** of another, circle the letter **O**.)

SCORING DIRECTIONS

Darken the bubble which corresponds to the score for each dimension or subdimension.

Use the following key in marking your scoring decisions:

NI = Needs Improvement
S = Satisfactory
NA = Not Applicable

PROCESSING DIRECTIONS

Forward the second copy to your system contact person to be mailed to:

Performance Assessment Laboratory
University of Georgia
115 Sycamore Drive
Athens, GA 30602-9101

CONFIDENTIAL
GEORGIA TEACHER EVALUATION PROGRAM: ANNUAL EVALUATION SUMMARY REPORT
 (Refer to back for instructions)

Teacher's Name				System			School		
System State Code	School State Code	Last 4 Digits Teacher SSN	Last 4 Digits Primary Evaluator SSN	Date			Evaluation Summary		
				MO	DAY	YR			
Teacher's Race/Ethnicity		Teacher's Sex		Current Year Status (darken only one)			Georgia Teacher Observation Instrument	Georgia Teacher Duties and Responsibilities Instrument	Overall Evaluation Summary
<input type="radio"/> American Indian, Alaskan Native <input type="radio"/> Asian, Pacific Islander <input type="radio"/> Black, Non-Hispanic <input type="radio"/> White, Non-Hispanic		<input type="radio"/> Male <input type="radio"/> Female		For teachers with fewer than 3 years experience: <input type="radio"/> Standard Year 1 <input type="radio"/> Standard Year 2 <input type="radio"/> Standard Year 3	For teachers with 3 or more years experience new to system: <input type="radio"/> Standard	For teachers with 3 or more years experience: <input type="radio"/> Formative Year 1 <input type="radio"/> Formative Year 2 <input type="radio"/> Standard	<input type="radio"/> Satisfactory <input type="radio"/> Unsatisfactory <input type="radio"/> Not Applicable (Formative Only)	<input type="radio"/> Satisfactory <input type="radio"/> Unsatisfactory	<input type="radio"/> Satisfactory <input type="radio"/> Unsatisfactory

GEORGIA TEACHER OBSERVATION INSTRUMENT SUMMARY COMMENTS	MARK ONLY AREAS FOR REQUIRED PDP
	A. Instructional Level <input type="radio"/> B. Content Development 1. Teacher - Focused <input type="radio"/> 2. Student - Focused <input type="radio"/> C. Building for Transfer <input type="radio"/>
	A. Promoting Engagement <input type="radio"/> B. Monitoring Progress <input type="radio"/> C. Responding to Student Performance <input type="radio"/> D. Supporting Students <input type="radio"/>
	A. Use of Time <input type="radio"/> B. Physical Setting <input type="radio"/> C. Appropriate Behavior <input type="radio"/>

GEORGIA TEACHER DUTIES AND RESPONSIBILITIES INSTRUMENT SUMMARY COMMENTS	IDENTIFY GTDRI AREAS FOR REQUIRED PDP (REFER TO INSTRUMENT FOR CODES)

(SIGNATURES) PRIMARY EVALUATOR: _____ DATE _____ Sign and return copy to principal's office. Signature acknowledges receipt of form, not necessarily concurrence. Written comments may be provided and/or attached. Initial and date here if comments are attached.

TEACHER: _____ DATE _____

PRINCIPAL: _____ DATE _____

Teacher's Comments: _____

GENERAL INSTRUCTIONS

- For scoring section that is to be bubbled, use pencil or ball point pen.
- Comments and other information may be typed or written in pencil or ball point pen.
- Erase completely any marks you wish to change.
- Make no stray marks on the top copy.
- Do not fold or staple the top copy.

CODING INSTRUCTIONS

Record teacher's name, system, and school at the top of the form. Record beginning and ending time and notes on the focus of the lesson.

TEACHER'S SYSTEM STATE CODE: Enter the three digit state code for the teacher's system (Example - Appling County 601).

TEACHER'S SCHOOL STATE CODE: Enter the four digit state code for the teacher's school (Example - Altamaha 1050).

LAST 4 DIGITS TEACHER SSN: Enter the last four digits of the teacher's social security number. (Example - If teacher's SSN is 987-65-4321, enter 4321.)

LAST 4 DIGITS OBSERVER SSN: Enter the last four digits of the observer's social security number. (Example - If the observer's SSN is 123-45-6789, enter 6789.)

DATE: Enter the numerical date (month, day, and year) of the extended observation (Example - 10-04-92).

EXTENDED OBSERVATION #: Enter the number corresponding to the total number of extended observations the teacher has had by all observers during this school year, including this one.

TOTAL MINUTES: Enter the two digit number corresponding to the total number of minutes spent in the classroom (Example - 20 or 35).

EXTERNAL OBSERVER: If the observer is external to school, for example from the central office, another school, RESA, etc., enter the observer's three digit system state code and four digit school state code.

SCORING DIRECTIONS

Darken the bubble which corresponds to the score for each dimension or subdimension.

Use the following key in marking your scoring decisions:

NI	=	Needs Improvement
S	=	Satisfactory

PROCESSING DIRECTIONS

Follow system guidelines for retaining Observer's and System's copies.

CONFIDENTIAL
GEORGIA TEACHER EVALUATION PROGRAM: ANNUAL EVALUATION SUMMARY REPORT
 (Refer to back for instructions)

Teacher's Name				System			School		
System State Code	School State Code	Last 4 Digits Teacher SSN	Last 4 Digits Primary Evaluator SSN	Date			Evaluation Summary		
				MO	DAY	YR			
Teacher's Race/Ethnicity		Teacher's Sex	Current Year Status (darken only one)			Georgia Teacher Observation Instrument	Georgia Teacher Duties and Responsibilities Instrument	Overall Evaluation Summary	
<input type="radio"/> American Indian, Alaskan Native <input type="radio"/> Asian, Pacific Islander <input type="radio"/> Black, Non-Hispanic <input type="radio"/> White, Non-Hispanic		<input type="radio"/> Male <input type="radio"/> Female	For teachers with fewer than 3 years experience: <input type="radio"/> Standard Year 1 <input type="radio"/> Standard Year 2 <input type="radio"/> Standard Year 3	For teachers with 3 or more years experience new to system: <input type="radio"/> Standard	For teachers with 3 or more years experience: <input type="radio"/> Formative Year 1 <input type="radio"/> Formative Year 2 <input type="radio"/> Standard	<input type="radio"/> Satisfactory <input type="radio"/> Unsatisfactory <input type="radio"/> Not Applicable (Formative Only)	<input type="radio"/> Satisfactory <input type="radio"/> Unsatisfactory	<input type="radio"/> Satisfactory <input type="radio"/> Unsatisfactory	

GEORGIA TEACHER OBSERVATION INSTRUMENT SUMMARY COMMENTS	MARK ONLY AREAS FOR REQUIRED PDP
	A. Instructional Level <input type="radio"/> B. Content Development 1. Teacher - Focused <input type="radio"/> 2. Student - Focused <input type="radio"/> C. Building for Transfer <input type="radio"/>
	A. Promoting Engagement <input type="radio"/> B. Monitoring Progress <input type="radio"/> C. Responding to Student Performance <input type="radio"/> D. Supporting Students <input type="radio"/>
	A. Use of Time <input type="radio"/> B. Physical Setting <input type="radio"/> C. Appropriate Behavior <input type="radio"/>

GEORGIA TEACHER DUTIES AND RESPONSIBILITIES INSTRUMENT SUMMARY COMMENTS	IDENTIFY GTDRI AREAS FOR REQUIRED PDP (REFER TO INSTRUMENT FOR CODES)

(SIGNATURES) PRIMARY EVALUATOR: _____ DATE _____
 TEACHER: _____ DATE _____
 PRINCIPAL: _____ DATE _____

Sign and return copy to principal's office. Signature acknowledges receipt of form, not necessarily concurrence. Written comments may be provided and/or attached. Initial and date here if comments are attached.

Teacher's Comments: _____

GENERAL INSTRUCTIONS

- For scoring section that is to be bubbled, use pencil or ball point pen.
- Comments and other information may be typed or written in pencil or ball point pen.
- Erase completely any marks you wish to change.
- Make no stray marks on the second copy.
- Do not fold or staple the second copy.

CODING INSTRUCTIONS

Record teacher's name, system, and school at the top of the form.

TEACHER'S SYSTEM STATE CODE: Enter the three digit state code for the teacher's system
(Example - Appling County 601).

TEACHER'S SCHOOL STATE CODE: Enter the four digit state code for the teacher's school
(Example - Altamaha 1050).

LAST 4 DIGITS TEACHER SSN: Enter the last four digits of the teacher's social security number.
(Example - If teacher's SSN is 987-65-4321, enter 4321.)

LAST 4 DIGITS PRIMARY EVALUATOR SSN: Enter the last four digits of the primary evaluator's social security number.
(Example - If evaluator's SSN is 123-45-6789, enter 6789.)

DATE: Enter the numerical date (month, day, and year) that form was completed (Example - 04-15-93).

TEACHER'S RACE/ETHNICITY: Darken the bubble which corresponds to the teacher's race/ethnicity.

TEACHER'S SEX: Darken the bubble which corresponds to the teacher's sex.

CURRENT YEAR STATUS: Darken the bubble which corresponds to the evaluation process the teacher was in at the end of the current school year when GTEP: ANNUAL EVALUATION SUMMARY REPORT was completed.

EVALUATION SUMMARY:

For teachers in the **STANDARD PROCESS:**

Darken the bubbles which correspond to the summary ratings on the GTOI and the GTDRI.

Darken the bubble for the **OVERALL EVALUATION SUMMARY** based on the following guidelines:

If satisfactory on both the GTOI and GTDRI, a satisfactory Overall Evaluation Summary rating is given.

If unsatisfactory on either the GTOI or GTDRI or both, an unsatisfactory Overall Evaluation Summary rating is given.

For teachers in the **FORMATIVE PROCESS:**

Darken the bubble Not Applicable for GTOI and darken the bubble which corresponds to the summary rating on the GTDRI.

Darken the bubble for the **OVERALL EVALUATION SUMMARY** based on the following guidelines:

If satisfactory on the GTDRI, a satisfactory Overall Evaluation Summary rating is given.

If unsatisfactory on the GTDRI, an unsatisfactory Overall Evaluation Summary rating is given.

GTOI AND GTDRI SUMMARY COMMENTS/AREAS FOR REQUIRED PDP:

For teachers in the standard process follow guidelines in the GTEP Manual for GTOI and GTDRI.

For teachers in the formative process follow guidelines in the GTEP Manual for the GTDRI only.

PROCESSING DIRECTIONS

Forward the second copy to your system contact person to be mailed to:

Performance Assessment Laboratory
University of Georgia
115 Sycamore Drive
Athens, GA 30602-9101

USE OF FORM IS OPTIONAL

CONFIDENTIAL
NOTIFICATION AND DOCUMENTATION RECORD

ANNUAL EVALUATION PROGRAM: GTEP GLEI Other _____

Evaluatee: _____ School: _____

System, RESA, or Psychoeducational Center: _____ Date: _____

Deficient Area: _____

Relevant Information (subject of concern, people involved, date, time, and place): _____

Action(s) Required (include time frame for correction): _____

Conference Record: (date, time, place, and summary): _____

(SIGNATURES)
EVALUATOR: _____ DATE: _____

EVALUATEE: _____ DATE: _____

Evaluatee's signature acknowledges receipt of form, not necessarily concurrence. Written comments may be provided below and/or attached to the evaluator's copy. Initial and date here if comments are attached.

Evaluatee's comments: _____

BIBLIOGRAPHY

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