



**PROBATIONARY TEACHERS
MID YEAR REPORT**

TEACHER'S NAME: _____
SCHOOL: _____
TEACHING CERTIFICATE: _____ DEGREES: _____
TEACHING EXPERIENCE IN DISTRICT: _____
TEACHING EXPERIENCE (TOTAL YEARS): _____
SUBJECT GRADE(S) TEACHING: _____

REPORT DUE - DECEMBER

EVALUATOR: _____

POSITION: _____

CLASSIFICATION OF TEACHER:

FIRST YEAR OF TWO YEAR PROBATION	<input type="checkbox"/>
SECOND YEAR OF TWO YEAR PROBATION	<input type="checkbox"/>
ONE YEAR PROBATION	<input type="checkbox"/>

INITIAL MEETING AND OBSERVATION DATES:

INITIAL MEETING	_____
1 ST TEACHER PROFILE	_____
2 ND TEACHER PROFILE	_____
3 RD TEACHER PROFILE	_____
4 TH TEACHER PROFILE	_____
5 TH TEACHER PROFILE	_____
6 TH TEACHER PROFILE	_____

PERFORMANCE STATUS:

SATISFACTORY	<input type="checkbox"/>
IMPROVEMENT REQUIRED	<input type="checkbox"/>
UNSATISFACTORY PERFORMANCE	<input type="checkbox"/>