

DOMAIN 4: PROFESSIONAL RESPONSIBILITIES

Component: 4C – Communicating with Families

Source(s) of Evidence: Records and Communication

| <u>Ineffective</u> | <u>Developing</u> | <u>Accomplished</u> | <u>Exemplary</u> |
|--|--|--|--|
| Observation 1 <input type="checkbox"/> I <input type="checkbox"/> I+ | Observation 1 <input type="checkbox"/> D- <input type="checkbox"/> D <input type="checkbox"/> D+ | Observation 1 <input type="checkbox"/> A- <input type="checkbox"/> A <input type="checkbox"/> A+ | Observation 1 <input type="checkbox"/> E- <input type="checkbox"/> E |
| Observation 2 <input type="checkbox"/> I <input type="checkbox"/> I+ | Observation 2 <input type="checkbox"/> D- <input type="checkbox"/> D <input type="checkbox"/> D+ | Observation 2 <input type="checkbox"/> A- <input type="checkbox"/> A <input type="checkbox"/> A+ | Observation 2 <input type="checkbox"/> E- <input type="checkbox"/> E |
| Observation 3 <input type="checkbox"/> I <input type="checkbox"/> I+ | Observation 3 <input type="checkbox"/> D- <input type="checkbox"/> D <input type="checkbox"/> D+ | Observation 3 <input type="checkbox"/> A- <input type="checkbox"/> A <input type="checkbox"/> A+ | Observation 3 <input type="checkbox"/> E- <input type="checkbox"/> E |
| Observation 4 <input type="checkbox"/> I <input type="checkbox"/> I+ | Observation 4 <input type="checkbox"/> D- <input type="checkbox"/> D <input type="checkbox"/> D+ | Observation 4 <input type="checkbox"/> A- <input type="checkbox"/> A <input type="checkbox"/> A+ | Observation 4 <input type="checkbox"/> E- <input type="checkbox"/> E |

Observation 1 Evidence

Observation 2 Evidence

Observation 3 Evidence

Observation 4 Evidence

Component: 4D – Participating in a Professional Community

Source(s) of Evidence: Professional Involvement Log

| <u>Ineffective</u> | <u>Developing</u> | <u>Accomplished</u> | <u>Exemplary</u> |
|--|--|--|--|
| Observation 1 <input type="checkbox"/> I <input type="checkbox"/> I+ | Observation 1 <input type="checkbox"/> D- <input type="checkbox"/> D <input type="checkbox"/> D+ | Observation 1 <input type="checkbox"/> A- <input type="checkbox"/> A <input type="checkbox"/> A+ | Observation 1 <input type="checkbox"/> E- <input type="checkbox"/> E |
| Observation 2 <input type="checkbox"/> I <input type="checkbox"/> I+ | Observation 2 <input type="checkbox"/> D- <input type="checkbox"/> D <input type="checkbox"/> D+ | Observation 2 <input type="checkbox"/> A- <input type="checkbox"/> A <input type="checkbox"/> A+ | Observation 2 <input type="checkbox"/> E- <input type="checkbox"/> E |
| Observation 3 <input type="checkbox"/> I <input type="checkbox"/> I+ | Observation 3 <input type="checkbox"/> D- <input type="checkbox"/> D <input type="checkbox"/> D+ | Observation 3 <input type="checkbox"/> A- <input type="checkbox"/> A <input type="checkbox"/> A+ | Observation 3 <input type="checkbox"/> E- <input type="checkbox"/> E |
| Observation 4 <input type="checkbox"/> I <input type="checkbox"/> I+ | Observation 4 <input type="checkbox"/> D- <input type="checkbox"/> D <input type="checkbox"/> D+ | Observation 4 <input type="checkbox"/> A- <input type="checkbox"/> A <input type="checkbox"/> A+ | Observation 4 <input type="checkbox"/> E- <input type="checkbox"/> E |

Observation 1 Evidence

| |
|------------------------|
| Observation 2 Evidence |
| Observation 3 Evidence |
| Observation 4 Evidence |

DOMAIN 4: PROFESSIONAL RESPONSIBILITIES

| |
|---|
| Component: 4E – Growing and Developing Professionally |
| Source(s) of Evidence: Professional Growth Post-Observation Reflections |

| <u>Ineffective</u> | <u>Developing</u> | <u>Accomplished</u> | <u>Exemplary</u> |
|--|--|--|--|
| Observation 1 <input type="checkbox"/> I <input type="checkbox"/> I+ | Observation 1 <input type="checkbox"/> D- <input type="checkbox"/> D <input type="checkbox"/> D+ | Observation 1 <input type="checkbox"/> A- <input type="checkbox"/> A <input type="checkbox"/> A+ | Observation 1 <input type="checkbox"/> E- <input type="checkbox"/> E |
| Observation 2 <input type="checkbox"/> I <input type="checkbox"/> I+ | Observation 2 <input type="checkbox"/> D- <input type="checkbox"/> D <input type="checkbox"/> D+ | Observation 2 <input type="checkbox"/> A- <input type="checkbox"/> A <input type="checkbox"/> A+ | Observation 2 <input type="checkbox"/> E- <input type="checkbox"/> E |
| Observation 3 <input type="checkbox"/> I <input type="checkbox"/> I+ | Observation 3 <input type="checkbox"/> D- <input type="checkbox"/> D <input type="checkbox"/> D+ | Observation 3 <input type="checkbox"/> A- <input type="checkbox"/> A <input type="checkbox"/> A+ | Observation 3 <input type="checkbox"/> E- <input type="checkbox"/> E |
| Observation 4 <input type="checkbox"/> I <input type="checkbox"/> I+ | Observation 4 <input type="checkbox"/> D- <input type="checkbox"/> D <input type="checkbox"/> D+ | Observation 4 <input type="checkbox"/> A- <input type="checkbox"/> A <input type="checkbox"/> A+ | Observation 4 <input type="checkbox"/> E- <input type="checkbox"/> E |

| |
|------------------------|
| Observation 1 Evidence |
| Observation 2 Evidence |
| Observation 3 Evidence |
| Observation 4 Evidence |

| |
|---|
| Component: 4F – Showing Professionalism |
| Source(s) of Evidence: Professional Involvement Log |

| <u>Ineffective</u> | <u>Developing</u> | <u>Accomplished</u> | <u>Exemplary</u> |
|--|--|--|--|
| Observation 1 <input type="checkbox"/> I <input type="checkbox"/> I+ | Observation 1 <input type="checkbox"/> D- <input type="checkbox"/> D <input type="checkbox"/> D+ | Observation 1 <input type="checkbox"/> A- <input type="checkbox"/> A <input type="checkbox"/> A+ | Observation 1 <input type="checkbox"/> E- <input type="checkbox"/> E |
| Observation 2 <input type="checkbox"/> I <input type="checkbox"/> I+ | Observation 2 <input type="checkbox"/> D- <input type="checkbox"/> D <input type="checkbox"/> D+ | Observation 2 <input type="checkbox"/> A- <input type="checkbox"/> A <input type="checkbox"/> A+ | Observation 2 <input type="checkbox"/> E- <input type="checkbox"/> E |
| Observation 3 <input type="checkbox"/> I <input type="checkbox"/> I+ | Observation 3 <input type="checkbox"/> D- <input type="checkbox"/> D <input type="checkbox"/> D+ | Observation 3 <input type="checkbox"/> A- <input type="checkbox"/> A <input type="checkbox"/> A+ | Observation 3 <input type="checkbox"/> E- <input type="checkbox"/> E |
| Observation 4 <input type="checkbox"/> I <input type="checkbox"/> I+ | Observation 4 <input type="checkbox"/> D- <input type="checkbox"/> D <input type="checkbox"/> D+ | Observation 4 <input type="checkbox"/> A- <input type="checkbox"/> A <input type="checkbox"/> A+ | Observation 4 <input type="checkbox"/> E- <input type="checkbox"/> E |

| |
|------------------------|
| Observation 1 Evidence |
| Observation 2 Evidence |
| Observation 3 Evidence |
| Observation 4 Evidence |