

Principal's Summative Evaluation Form

Principal's Name: _____ School Year: _____

School: _____ District: _____

E: Exemplary

P: Proficient

NI: Needs Improvement

U: Unsatisfactory

Performance Standard	Principal's Self-Assessment	Evaluator(s) Rating	Final Rating
Vision			
Instructional Leadership			
Effective Management			
Climate			
School/Community Relations			
Ethical Behavior			
Interpersonal Skills			
Staff Development			
Principal's Professional Development			
Overall Summative Rating			

Comments/Feedback for Each Assessed Standard: (Use additional sheets if needed)



Signature of Principal

Date _____

Signature of Evaluator

Date

(Signature of Evaluator #2)

(Date)

NOTE: The signature of the principal above indicates that the evaluation has been reviewed with her/him. It does not imply agreement with the evaluation.