|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name:** | |  | **School** |  |
| **School Year:** | |  | **Select Goal #** |  |
| **Select Type of Goal:  Marzano Focused Non-Classroom Model Element:**  **Personal Choice** | | | | |

**I. Area Identified for Development of Professional Practice**

|  |  |
| --- | --- |
| **What is the expected outcome you hope to achieve? What specifically do you hope to improve upon?** | **Rationale/Explain why you chose this goal** |
|  |  |

**II. Professional Learning Goal and Activities**

**GOAL: Learner Development: Instructional Support Personnel (Non-Classroom) #1**

**The Instructional Support Personnel (Non-Classroom) understands how learners grow and develop, recognizing that patterns of learning and development vary individually within and across the cognitive, linguistic, social, emotional, and physical areas, and designs and implements developmentally appropriate and challenging learning experiences.**

**Strategies/Activities (Choose from the following):**

**The Instructional Support Personnel (Non-Classroom) regularly assesses individual and group performance in order to design and modify instruction to meet learners’ needs in each area of development (cognitive, linguistic, social, emotional, and physical) and scaffolds the next level of development.**

**The Instructional Support Personnel (Non-Classroom) creates developmentally appropriate instruction or plans that take into account individual learners’ strengths, interests, and needs and that enables each learner to advance and accelerate his/her learning.**

**The Instructional Support Personnel (Non-Classroom) collaborates with families, communities, colleagues, and other professionals to promote learner growth and development.**

**Other:**

**Follow-Up Activities (As appropriate)**

|  |  |  |  |
| --- | --- | --- | --- |
|  | Collaborate with PLC |  | Fine tune implementation of new strategies |
|  | Write a report / article |  | Collect and analyze student achievement data |
|  | Publish hard or electronic copy |  | Provide evidence of turn-key training |
|  | Apply for an award or grant |  | Share information with colleagues/department |
|  | Conduct action research |  | Expand the goal to a school or district initiative |
|  | Ongoing reading / research |  | Other documentation as appropriate (specify) |
|  | Completion of a course, degree or certificate |  |  |

**III. District and School PDP Support**

|  |
| --- |
| Administration will meet with you throughout the school year to discuss your progress through the classroom observation and post-observation conference process. You are encouraged to discuss your needs and your progress with administration at other times as needed throughout the year. |

***My signature below indicates that I have received a copy of this Professional Development Plan and that I understand and contributed to its contents.***

|  |  |  |  |
| --- | --- | --- | --- |
| **Staff Person’s Signature** |  | **Date** |  |
| **Supervisor’s Signature** |  | **Date** |  |