

Work Plan

Educator:	Click or tap here to enter text.
School:	Click or tap here to enter text.
Date:	Click or tap to enter a date.
Additional Adult(s):	Click or tap here to enter text.
Coach:	Click or tap here to enter text.
Class Location:	Click or tap here to enter text.
Time:	Click or tap here to enter text.
Adult(s) Role:	Click or tap here to enter text.

CORE VALUES

Name the teacher's core values and any information about why or their context.

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Additional Information:

Teacher's strengths, interests, learning preferences, support needs, etc.:

Teacher's Demographics (i.e., years of service, locations/positions, certifications, trainings, areas of expertise, etc.)

COACHING SUPPORT INFORMATION

Provide details related to coaching support.

**Best days for
observations**

Click or tap here to enter text.

**Best days/times for
coaching conversation**

Click or tap here to enter text.

**Best methods of
communication**

Click or tap here to enter text.

Ways I like to learn

Click or tap here to enter text.

Additional Information:

SCHOOL IMPROVEMENT PLAN AND SPDG GOALS ALIGNMENT

Review and discuss the alignment between the SPDG Goal and the School Improvement Plan (SIP).

Aligned SIP Goal(s):

Click or tap here to enter text.

SPDG Goal:

Increased mathematics performance, narrow the gap for learners with disabilities, and increased social-emotional competence.

EVIDENCE-BASED PRACTICES

Review the targeted practices of the district selected EBPs. Document the teacher's self-assessment rating:

- 0-minimal understanding
- 1-moderate understanding
- 2-confident to implement

Core Mathematics EBP: Fluency

Date Started:

Date Proficient:

TARGETED PRACTICES	SELF-ASSESSMENT
a.	Choose an item.
b.	Choose an item.

Additional Notes:

Core Mathematics EBP:

Date Started:

Date Proficient:

TARGETED PRACTICES	SELF-ASSESSMENT
a.	Choose an item.
b.	Choose an item.

SDI EBP:

Date Started:

Date Proficient:

TARGETED PRACTICES	SELF-ASSESSMENT
a.	Choose an item.
b.	Choose an item.

SDI EBP:

Date Started:

Date Proficient:

TARGETED PRACTICES	SELF-ASSESSMENT
a.	Choose an item.
b.	Choose an item.

SEL EBP:

Date Started:

Date Proficient:

TARGETED PRACTICES	SELF-ASSESSMENT
a.	Choose an item.
b.	Choose an item.

SEL EBP:

Date Started:

Date Proficient:

TARGETED PRACTICES	SELF-ASSESSMENT
a.	Choose an item.
b.	Choose an item.