

Holton Public Schools
Mid-Year Professional Growth Plan (PGP) Summary Report
(Non-Instructional Administrators / Unaffiliated Staff)

This form is to be completed by the staff member as a summary of progress toward the completion of the goals outlined in the staff member's Professional Growth Plan (PGP).

Employee's Name: _____ **Department:** _____

1. Please discuss the progress that you have made toward the completion of the goals or objectives outlined in the Professional Growth Plan (PGP) for the 2015-2016 school year.

2. Please discuss the specific goals that you have outlined for the remainder of the 2015-2016 school year based upon those performance goals outlined in the Professional Growth Plan (PGP) that have not been completed yet.

3. Please identify resources or support that are needed from the Superintendent's office to help you achieve progress toward goal or objective completion, as outlined in your Professional Growth Plan (PGP).

This finalized / signed form is due to the evaluator within 10 working days of the mid-year discussion.

Employee's signature: _____ Date: _____

Signature of the employee acknowledges completion of the mid-year progress summary meeting and receipt of this form.

Evaluator's signature: _____ Date: _____