

2018-2019 NO APPRAISAL DOCUMENTATION

EMPLOYEE NAME:					
EMPLOYEE ID:					
CAMPUS/DIVISION NAME:					
PRIMARY APPRAISER NAME:					
APPRAISAL TOOL:	<input type="checkbox"/> Teacher Excellence Initiative <input type="checkbox"/> Principal Excellence Initiative <input type="checkbox"/> Assistant Principal Excellence Initiative <input type="checkbox"/> 3R	<input type="checkbox"/> LPDAS <input type="checkbox"/> CMS <input type="checkbox"/> SCEI/SCAI <input type="checkbox"/> OTHER _____			
<p>In 2018-2019, a summative appraisal was not completed for this employee for the reasons outlined below:</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Administrative Leave <input type="checkbox"/> Medical Leave <input type="checkbox"/> Military Leave <input type="checkbox"/> Deceased <input type="checkbox"/> Hired after April 1, 2019 </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Less than Annual Appraisal <input type="checkbox"/> Resigned <input type="checkbox"/> Incomplete <input type="checkbox"/> Invalid <input type="checkbox"/> Other _____ </td> </tr> </table> <p>Comments:</p>				<input type="checkbox"/> Administrative Leave <input type="checkbox"/> Medical Leave <input type="checkbox"/> Military Leave <input type="checkbox"/> Deceased <input type="checkbox"/> Hired after April 1, 2019	<input type="checkbox"/> Less than Annual Appraisal <input type="checkbox"/> Resigned <input type="checkbox"/> Incomplete <input type="checkbox"/> Invalid <input type="checkbox"/> Other _____
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<p><i>In lieu of a 2018-2019 employee appraisal, this employee understands that the prior year's appraisal will be held over in abeyance. This record will be included in the employee's personnel file.</i></p>					
Primary Appraiser Signature		Date			
Employee Signature		Date			

Please return completed document to performancemanagement@dallasisd.org for inclusion in the employee personnel file.