

**TRUMBULL PUBLIC SCHOOLS**  
**Teacher Supervision, Evaluation, Professional Learning Plan 2021-2022**

**OBSERVATION SUMMARY**

**Teacher:** \_\_\_\_\_ **School/Grade:** \_\_\_\_\_

**Date:** \_\_\_\_\_ **Period/Subject:** \_\_\_\_\_

**Time In:** \_\_\_\_\_ **Time Out:** \_\_\_\_\_

**I. MANAGEMENT:**

**II. INSTRUCTION (Plan/Teach):**

**III. ASSESSMENT:**

**Signature of Evaluator/Supervisor:** \_\_\_\_\_ **Date** \_\_\_\_\_

**Signature of Teacher:** \_\_\_\_\_ **Date** \_\_\_\_\_