Filing an Appeal

You should be prepared to present facts and evidence in support of your claim that the composite score is incorrect. Please be sure to have the following:

1. A general statement of why you believe the score is incorrect.

2. Specific information/documentation showing:
   - Communication with administration about your evaluation
   - Mathematical errors made in calculating your score(s)
   - Student/Teacher Data errors
   - Disagreements concerning SLOs
   - Procedural violations

3. A statement (preferably with documentation) about any other circumstances affecting your evaluation.
Building a Record About Student/Teacher data:

For each course:

Date on which I received the initial roster:

Dates on which I reviewed the roster:

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Please attach copies of:

The initial roster

Communication with the district about the accuracy of the roster

The final roster

Documentation of any unresolved errors
Building a Record About SLOs

Names of course(s) for which I did an SLO:

Date on which I submitted the SLO(s):

Date on which (each) SLO was approved:

Were there any unresolved disputes about your SLO(s)?

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

Please attach copies of:

Each SLO

Student rosters for each class

Data you used to support the establishment of your targets

Any communication with administration about your SLO(s)

The assessment worksheet for each SLO
Building a Record About the Local Assessment Component

For individual scores:

For each course, identify the assessment used:

<table>
<thead>
<tr>
<th>Course</th>
<th>Assessment</th>
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How was the assessment selected?

Were you involved in the creation of the assessment?

Was the assessment reflective of what you teach?

Were you involved in setting targets for your students?

Were the targets reasonable?

If not, what targets should have been used?

Please attach:

Target worksheets for each class

Any communication with administration concerning your targets
### Building a Record About Observations:

Name of your lead evaluator:

#### For each announced observation:

<table>
<thead>
<tr>
<th>Date of Observation</th>
<th>Date of pre-conference</th>
<th>Date of post-conference</th>
<th>Date feedback was provided</th>
<th>Name of observer</th>
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#### For each unannounced observation:

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<thead>
<tr>
<th>Date of Observation</th>
<th>When were you notified of observation</th>
<th>Were the circumstances appropriate for an observation (if not, please explain)</th>
<th>Did you notify the observer of the situation</th>
<th>Date feedback was provided</th>
<th>Name of observer</th>
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Please attach copies of:

- Any written feedback you received
- Any observation forms you completed and/or received
- Any communication with administration about your observations
Building a Record About “Other Evidence”

Artifact Collection:
Date of Artifact Meeting: ___________________

<table>
<thead>
<tr>
<th>Description of Each Item</th>
<th>Applicable NYS Teaching Standard(s)</th>
<th>Evaluator’s Response</th>
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Attach copies of the artifacts you submitted.

**Goal Statements:**

Attach a copy of the goal statement you submitted
On what date did you submit it? __________
Identify its relationship to the NYS Teaching Standards
Attach a copy of the evaluator’s response to your statement

**Self-Reflection:**

Attach a copy of your statement(s) of self-reflection
Identify its/their relationship to the NYS Teaching Standards
On what date were the statement(s) submitted?
Attach a copy of the evaluator’s response to your self-reflection
Building a Record on a TIP

What date did you receive your composite score? ________________

What was your composite score and rating? ________________

Is there an appeal pending over the rating? Yes  No

Did you write a response to the rating? Yes  No

What was the date of the first TIP meeting? ________________

Who attended the meeting?
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

What areas were identified as needing improvement?

What activities were recommended?

Did you complete this activities?

If yes, when: _________________________________________________________________________

If no, why not: _______________________________________________________________________

Did the district provide you with time to complete the activities? Yes  No

Did the district pay for these activities? Yes  No

Were these activities helpful? Yes  No

Were there follow-up meetings to discuss the TIP? Yes  No

Who attended? _________________________________________________________________________

Please attach:
A copy of the TIP
Documentation of professional development activities you completed
Any communication with administration about your TIP