**Individual PBC Reflection and Feedback (Step 3)**

**HS 1302.92 Training and professional development (c) (2), PBC Component 3: Reflection and Feedback Policy:** Education staff receiving coaching as identified in the Needs Assessment Survey will receive opportunities to be observed and receive feedback and modeling of effective teacher practices directly related to program performance goals.

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| **CFS:** |  |
| **Reflection 1 2 3 4 5 6 7** (circle) | **Date of reflection:**  |
| **Goal:**   |  |
| **I have accomplished step(s) #****Notes:** |

|  |  |
| --- | --- |
| **Step 1.**  | * I didn’t use this step.
* I use this step sometimes
* I use this step with all my families.
 |
| **Step 2**.  | * I didn’t use this step.
* I use this step sometimes
* I use this step with all my families.
 |
| **Step 3.**  | * I didn’t use this step.
* I use this step sometimes
* I use this step with all my families.
 |

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| **I am currently working on step #** |  |
| **What I have noticed about my progress:** |  |

|  |  |
| --- | --- |
| **Reflection Progress:** (highlight one) | I need to make changes to my plan to achieve this goal by revising the goal or changing the action steps. (See new Shared Goals and Action Plan)I am making progress toward this goal and will keep implementing my action plan.I have achieved this goal by meeting the criteria specified in the goal achievement statement(s). Furthermore, I am using this chosen practice with all my families.  |

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| --- | --- |
| **I know I have achieved my goal because:**(This will be filled out when coachee has achieved their goal) |   |
| **Notes/Goal adjustments:****Tips and adaptations:**  |  |
|  **Additional resources or supports requested:**  |  |
| **Next Observation and/or Meeting Date and Time:**If either party is unable to participate in the mutually acceptable date, both parties agree to inform each other as soon as possible and reschedule a mutually acceptable date at that time. |  |