

PARENT OR GUARDIAN INPUT FORM

ADMINISTRATOR EVALUATION

RELATING TO ADMINISTRATOR: _____

HOLDING THE POSITION OF: _____

SCHOOL YEAR: _____

Instructions:

1. Please complete the evaluation by circling the most appropriate number.
2. This form should be completed by January 15 and placed into the box located at the administrative office or mailed to:
Rolling Hills Public Charter School
8900 N. Horseshoe Bend Road
Boise, ID 83704
Attention: Board of Trustees Secretary (6320F1)
3. Only one form should be completed by each parent for this Administrator for each school year.
4. If a parent has a concern with regard to an event occurring in their child's classroom and wishes to more directly address this issue, please understand that this form alone will not necessarily directly address the parental concern and that such should be directly raised with the teacher or administrator.
5. Please offer specific comments when possible. Specific comments will be considered in the preparation of the administrator's evaluation and will aid both the Charter School and the Administrator in addressing performance.

Area of Evaluation	Agree	Disagree	Don't know
1. Works with parents, staff and students in development and promotion of the school's vision.	1	2 3 4 5	0
	Comment:		

	Agree	Disagree	Don't know			
2. Promotes and maintains high standards of Academic Excellence for the performance of students and staff.	1	2	3	4	5	0
	Comment:					
3. Manages all aspects of the school to ensure a positive educational experience for all students.	1	2	3	4	5	0
	Comment:					
4. Listens to community members, parents, and students and timely responds to their concerns.	1	2	3	4	5	0
	Comment:					
5. Treats students and adults with respect.	1	2	3	4	5	0
	Comment:					
6. Communicates with community members accurately.	1	2	3	4	5	0
	Comment:					

	Agree	Disagree			Don't know	
7. Shows awareness/understanding of developmental characteristics of different age groups. Acts with an understanding of social, racial, cultural, political and economic forces that influence a positive school environment.	1	2	3	4	5	0
	Comment:					
8. Encourages parental involvement in the educational process.	1	2	3	4	5	0
	Comment:					
9. Is a positive advocate for students.	1	2	3	4	5	0
	Comment:					
10. Is a strong and visible leader of the school.	1	2	3	4	5	0
	Comment:					
11. Effectively coordinates school programs that promote student involvement, education, safety, growth, and development of responsibility.	1	2	3	4	5	0
	Comment:					

	Agree	Disagree			Don't know	
12. Administers student discipline fairly and consistently.	1	2	3	4	5	0
	Comment:					
13. Maintains a school climate that welcomes parents, families and community members and invites their participation. Encourages teachers to provide opportunities to engage families to assist in student learning.	1	2	3	4	5	0
	Comment:					
14. Have you personally met with the administrator?	YES			NO		
15. Have you had any reason to visit the administrator's office?	YES			NO		
16. Were you satisfied that your concerns were addressed?	YES			NO		

Any additional comments you wish to share not covered by the above questions (**please feel free to attach a separate page**):

Please complete and sign the form and place in a sealed envelope.

Name: _____

Signature: _____

Date: _____

Telephone No.: _____

Form History:

Adopted on: 7/12/2012

Revised on: