**Cortland Enlarged City School District**

**Self-Reflective Narrative**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name:** |  |  | **Date:** |  |

|  |  |  |
| --- | --- | --- |
| **Status:** | **[ ]  Tenured** **(+Nurses following 3 years of service)** | **[ ]  Probationary** |

**Supervision Choice:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Formal Probationary** | **Formal Tenured** |  |  |
| [ ]  Formal  | [ ]  Formal  |  |  |
|  *(due April 1)* | *(due May 15 )* |  |  |
|  |  |  |  |
| [ ]  Individual  | [ ]  Individual  |  |  |
|  Support Plan |  Support Plan |  |  |
|  *(due April 1)* | *(due June 1)* |  |  |
|  |  |  |  |

***Discuss the degree to which you were able to attain the goals of your Annual Action Plan.*** *What positive impact on student achievement did you observe? Are there aspects of your action plan that you would do differently? Were there other experiences that contributed significantly to your professional growth? List courses, research or workshops that you found to be valuable.*

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**cc: Principal**

 **Staff Member**

 **Administrative Supervisor**