

**Plan of Improvement  
(Paraeducator Growth Plan)**

**Paraeducator Name** \_\_\_\_\_

**Supervising Teacher** \_\_\_\_\_

**This form constitutes official notice from your immediate supervisor that your performance in the area(s) indicated has been judged to be in need of improvement and outlines specific action for expected improvements.**

**1. Area(s) Requiring Improvement**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**2. Action to Improve Performance**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**3. Timeline for Completion**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**4. Date to Review Improvement** \_\_\_\_\_

**A copy of this form was submitted to SEK Interlocal Administration on** \_\_\_\_\_

**Date**

**This notification and professional growth plan has been discussed with this classified employee. The employee acknowledges the receipt of this form.**

\_\_\_\_\_

**Paraeducator Signature**

\_\_\_\_\_

**Supervising Teacher Signature**

\_\_\_\_\_

**Date**

\_\_\_\_\_

**Date**

**After reviewing the progress toward correcting the situation, the supervising teacher has made the following recommendation:**

- **The incident(s) have been resolved; therefore the staff member shall be removed from the Plan of Improvement.**
  
- **The incident(s) was not resolved, but improvement has been made and staff member shall be monitored, along with the timeline being extended to:\_\_\_\_\_**
  
- **Disciplinary Action is necessary. SEK Interlocal Administration was notified on:\_\_\_\_\_**