

APPENDIX E-3

TWAIN HARTE SCHOOL DISTRICT FIVE-YEAR OPTION EVALUATION AGREEMENT

I, _____, hereby request to voluntarily participate in the “Five-year Option” of evaluation for the _____ school year.

I qualify for this option because:

1. I have been employed by the District for ten or more years.
2. I have been certified as highly qualified pursuant to ESEA/NCLB.
3. I either met or exceeded the Standards of Performance of the District in my last Performance Evaluation.

Teacher Signature: _____ Date: _____

I certify that the teacher is eligible to participate in the “Five-year Option”.
Further, I approve of the option selected.

Supervisor Signature: _____ Date: _____