



Parental Input to Teacher Communication For Teacher Performance Appraisal Process

Name of School:		Date:				
Principal:		Grade:				
Teacher's Name:		Course Code: (Secondary)				
inpu	upport exemplary teaching and learning, every District S t. This input must focus on parent/guardian level of satis progress.					
The Teacher:			Disa	Disagree		
Communicates, when appropriate, effectively with me about my child's learning progress.						
Please answer only if your child has an Individual Education Plan (IEP). Communicates expectations, accommodations, modifications, and student progress related to my child's IEP.						
Have you attended parent-teacher interviews this year? ☐ Yes ☐ No						
Hav	e you contacted the teacher about your child's pro	gress?	Yes	☐ No		
Did you return the last page of your child's Report Card your comments and signature?		d with	Yes	☐ No		
PLEASE RETURN THIS FORM TO THE SCHOOL PRINCIPAL BY IN AN ENVELOPE MARKED 'CONFIDENTIAL'.						
Surveys received after this date will not be used in the Teacher Appraisal process.						
NOTE: Regulation 99/02 made under the Education Act/Ontario, outlines the requirements and limitations of the Parent/Pupil input to the Teacher Performance Appraisal Process. Although the Regulation states that only signed forms will be accepted as input, a parent has the right, under Regulation 99/02 5(5), to request removal of identification before the form is shown to the teacher.						
I rec	I request removal of identification from the form before it is used.					
Con	npleted by:	Signature:			_	
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