Name: **Year Group:**   **Scale Point:**   **Additional Responsibilities:**

	Date	Who	Strengths (including grade where appropriate)	Areas for Development
Observations				
Pupil Progress Data				
Work Scrutiny				
Pupil Conferences				
Learning Walks/ Drop-ins				

Overall Evaluation	Main Areas of Development/Action Points

Recommendation for Pay Progression: Yes/No   **Sufficient Evidence for Accelerated Pay Progression: Yes/No**