

CULVER CITY UNIFIED SCHOOL DISTRICT

Office of Human Resources

**Agreement between the Board of Education of the Culver City Unified School District
and the Culver City Federation of Teachers**

Article 29—EVALUATION

Section C—Employees to be Evaluated

Evaluation of unit members shall occur as follows:

- a. Probationary employees shall be evaluated at least once every year.
- b. Permanent employees shall be evaluated at least once every other year.
When a permanent certificated employee has received an overall unsatisfactory evaluation, the District shall annually evaluate the employee until the employee achieves a satisfactory evaluation or is separated from the District.
- c. In lieu of 1.b above, permanent employees may be evaluated at least once every five (5) years at the discretion of the site administrator, with the consent of the unit member. To qualify for this five-year evaluation period, employees must have been employed in the District for at least ten (10) years, have permanent status, be highly qualified as defined in (10 U.S.C. Section 780), and have received a previous evaluation rating which meets or exceeds standards.

It is the decision of this administrator that _____ will not be evaluated
Name of Teacher
during the 2016-2017 school year.

The teacher has met the following required criteria:
(Please check)

- Has been employed by the Culver City Unified School District for at least ten years (___ # of years employed by CCUSD)
- Has permanent status
- Has met the criteria for NCLB and is "highly qualified" in all core academic subject areas that he/she teaches, including EL certification
- Has received previous evaluation rating which meets or exceeds standards in all areas

I understand that this five (5) year cycle is at the discretion of the administrator and that the administrator may evaluate me before the five year cycle ends.

_____	_____	_____
Teacher Signature	Date	School Site
_____	_____	
Administrator Signature	Date	

For Personnel Office Use Only: **Date of Last Evaluation** _____

Date of Next Evaluation _____