

## THE SCHOOL DISTRICT OF PALM BEACH COUNTY Consultant Evaluation

PO NUMBER	 	 —
- CHOMBER		

School/Department	John F. Kenn	edy Middle School						
Name of Consultant	Education De	velopment Center, Inc						
Contract Period	From	To						
Rating: 5 - Superio	or 4 - Satisfactory F	Plus 3 - Satisfactory 2 - Satisfactory Minus 1- Unsatis	sfac	tor	'V			
JOB KNOWLEDGE AND SKILL								
1. Technical and proc	edural know-how to comp	5 4		_ <del>Z</del>	1			
2. Knowledge of his/h	er specialty area			┝	+			
3. Ingenuity, creativity	, and innovation		+	├-	+-			
4. General quality of t			+-	-	┼┤			
5. Student Assessmer	nt		+	-	$\vdash$			
PRODUCTIVITY			<u> </u>		1			
1. Services provided n	natched the specification	s of the contract	_	Γ				
2. Results produced			+-	-	$\vdash$			
3. Ability to meet goal	s as scheduled		+	$\vdash$	$\vdash$			
4. Success of the proj	ect		+-	-	$\vdash$			
COMMUNICATION				<u> </u>	L			
1. Listening skills			1	_				
2. Returned phone cal	ls, follow-up information,	etc. in a timely manner	+	<del> </del>				
3. Overall communication skills				<del></del>	$\dashv$			
4. Overall accessibility	/availability		+		$\vdash$			
NTERACTION								
1. Working relationship	ps with teachers and/or s	tudents	т - т		$\overline{}$			
2. Ability to work as pa	art of a team		+	_				
	information received as t	the project progressed	+	$\dashv$	$\vdash$			
Rating: A - Agree				l				
Demonstrates deper		N/A - Not Applicable	A	D	WA			
2. Demonstrates ingenuity/creativity/innovation					H			
<ol><li>Performs well unde</li></ol>			$\vdash$	$\dashv$	$\vdash$			
4. Effective when pres			$\vdash$	$\dashv$	$\vdash$			
<ol><li>Expresses ideas cle</li></ol>	early and uses correct gra	ammar in written communication	$\vdash$	-				
<ol><li>Listens effectively</li></ol>	_			-	$\dashv$			
7. Provides feedback	in a constructive and time	ely manner		-				
	equires little or no supervi			$\exists$	$\dashv$			
9. Treats staff and/or students with fairness, respect and integrity.					_			
would hire this consult	ant again. 🗌 Yes 🗍	No						
					_			
		SIGNATURE OF EVALUATOR DATE			_			
		PRINT NAME OF EVALUATOR						