

ADMINISTRATIVE CIRCULAR NO. 82
Office of the Deputy Superintendent

SAN DIEGO UNIFIED SCHOOL DISTRICT

Date: April 2, 2009

To: Principals and Site Administrators (excepting charter schools),
School Improvement Officers

Subject: PEER ASSISTANCE AND REVIEW (PAR) PROGRAM

**Department and/or
Persons Concerned:** K-12 Teachers (excepting charter schools)

Due Dates: Traditional Sites – May 22, 2009
Year-Round Sites – June 26, 2009

Reference: Article 18 of the Collective Negotiations Contract between the
Board of Education, San Diego Unified School District and the
San Diego Education Association

Action Requested: Complete and return the attachment by the due date

Attachments: Participating Teacher Information Sheet

Brief Explanation:

Permanent K-12 classroom teachers who receive overall evaluations of “Unsatisfactory” based on the ratings of the first four elements in any combination, or “Unsatisfactory” in one of the four, and overall evaluations of “Less than Effective” are required to participate in the Peer Assistance and Review (PAR) Program. The PAR Program also provides assistance on a space-available basis to teachers who receive evaluations of “Requires Improvement.”

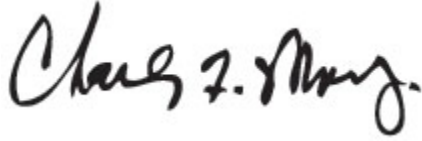
After finalizing 2008-2009 teacher evaluations, all principals must complete and return the attached Participating Teacher Information Sheet to the PAR Program indicating whether or not any teachers at their sites qualify for services in 2009-2010.

Return the forms **via school mail** in a sealed envelope marked “Confidential” to Susan Manning, IMC, Building A, by the due dates indicated above. To ensure confidentiality, do **not** return the forms via e-mail or fax.

PAR consulting teachers will contact principals soon after the due dates to arrange support beginning in Summer 2009 for teachers who qualify for the program. Questions about the PAR Program should be directed to Susan Manning, 858-496-1861 or smanning@sandi.net.

Susan Manning
Program Manager
Peer Assistance and Review Program

APPROVED:

A handwritten signature in black ink that reads "Chuck Morris". The signature is written in a cursive, slightly slanted style.

Chuck Morris
Deputy Superintendent

SM:sl

Attachment

Distribution Lists: B, D, E, and F

**PARTICIPATING TEACHER INFORMATION SHEET
2009-2010**

[] No teachers at my site qualify for PAR support in 2009-2010.

Site: _____ Principal's Name: _____

Principal's Signature: _____

OR

[] The teacher below received "Unsatisfactory" and/or "Requires Improvement" on his/her final 2008-2009 evaluation. *(Complete a form for each qualifying teacher).*

Teacher's Last Name: _____ Teacher's First Name: _____

School Site: _____ Grade/Content Area: _____

Evaluation Element	Unsatisfactory	Requires Improvement
Progress of students toward established standards		
Instructional techniques and strategies		
Adherence to curricular objectives		
Establishment and maintenance of suitable learning environment		
Performance of non-instructional duties and responsibilities		
Achievement of stated objectives		
Overall Evaluation		

Principal's Name: _____

Principal's Signature: _____

**Return this form via school mail in a sealed envelope marked "Confidential" to:
Susan Manning, IMC Bldg. A**

**Due Dates:
Traditional Sites – May 22, 2009
Year-Round Sites – June 26, 2009**