

BEDFORD COUNTY PUBLIC SCHOOLS SUMMATIVE EVALUATION REPORT

Employee _____

School/Department _____ Date _____

Recommendations: (Check One)

- I recommend this employee for re-employment.
- I do not recommend this employee for renewal of contract.
- I recommend this employee for dismissal.

Principal/Supervisor Comments:

Employee Comments:

Principal/Supervisor _____ Date _____

Employee _____ Date _____