

Teacher Self-Evaluation Worksheet

Basic Information

Name:

Grade/Subject:

Date:

Self-Evaluation Criteria

Criteria	Self-Rating (1-5)	Comments / Evidence
Lesson Planning & Preparation	<div></div>	<div></div>
Instructional Delivery	<div></div>	<div></div>
Classroom Management	<div></div>	<div></div>
Assessment & Feedback	<div></div>	<div></div>
Professional Development	<div></div>	<div></div>
Student Engagement	<div></div>	<div></div>

Strengths

Areas for Improvement

Action Plan / Goals