

Professional Growth Plan (Required)

School Year: _____

Name: _____ Position: _____

School: _____

NC Professional School Counselor Standards

1. Demonstrates leadership, advocacy, and collaboration.	Standard(s) to be addressed: Elements to be addressed:
2. Promotes a respectful environment for diverse populations of students.	
3. Understands and facilitates the implementation of a comprehensive school counseling program	
4. Promotes learning for all students.	
5. Actively reflects on his/her practice.	

School Counselor's Strategies

Goals for Elements	Activities/Actions	Expected Outcomes and Evidence of Completion	Resources Needed	Timeline
Goal 1:				
Goal 2:				

School Counselor's Signature: _____ Date: _____

Administrator's Signature: _____ Date: _____

Professional Growth Plan – Mid-Year Review (required)

To be completed by (date) _____

School Counselor _____ Academic Year: _____

Evidence of Progress Toward Specific Standards of Elements to be Addressed/Enhanced

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Narrative

School Counselor's Comments:	Administrator's Comments:
School Counselor's Signature:	Administrator's Signature:
Date:	Date:

Professional Growth Plan – End-of-Year Review (Required)

To be completed by (date) _____

School Counselor _____ Academic Year: _____

Evidence of Progress Toward Specific Standards or Elements to be Addressed/Enhanced

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Goal 1 was successfully completed. Yes ☐ No ☐

Goal 2 was successfully completed. Yes ☐ No ☐

Narrative

School Counselor's Comments:	Administrator's Comments:
School Counselor's Signature: Date:	Administrator's Signature: Date: