

**Mission Consolidated Independent School District
TEACHER ANNUAL EVALUATION WAIVER REQUEST FORM**

Teacher Name: _____

Campus: _____

Grade Level/Assignment _____

Last Complete T-TESS Appraisal (NOT Alternative Appraisal) School Year: _____

*** COPY OF APPRAISAL MUST BE ATTACHED***

I am requesting to waive my annual appraisal for the _____ School Year based upon the fact that I meet all of the following criteria.

Type of Waiver: ☐ 1st Year of 2-Year Waiver ☐ 2nd Year of 2-Year Waiver

(Please check all related criteria that are applicable to you.)

- _____ 1. Appraised under the T-TESS Appraisal System during the last school year
Criteria #1 is not applicable to second year qualifying waive requests
- _____ 2. Employed as a Teacher with Mission CISD during the last 3 years
- _____ 3. Not a new teacher to campus of which I am requesting a waiver
- _____ 4. Currently employed under a Term Contract
- _____ 5. Fully certified by SBEC (not on teaching permit, excluding a permit required due to a district mandated assignment)
- _____ 6. Teaching in area of certification
- _____ 7. Received a rating of at least proficient on all sixteen dimensions and did not identify any area of deficiency during the previous appraisal
(Qualifies for a 2 year waiver, but must apply each year)
- _____ 8. Not being supervised by a New Campus Principal

I understand that during any school year when a complete appraisal under the Texas Teacher Evaluation Support System (T-TESS) is not scheduled, either the teacher or the principal MAY require that an appraisal be conducted by providing written notice to the other party.

I understand that I am required to participate in the Goal-Setting and Professional Development Plan process, the performance of students, and the following year's Goal-Setting and Professional Development plan.

I understand that the principal/supervisor will continue to conduct walkthroughs and informal observations.

I understand that an alternative annual review process, which will produce a written document, will be presented to me, signed by my supervisor and me, and maintained in my personnel file.

Employee's Signature

Date

Principal's Signature

Approved Denied

Date

Reason for Denial _____

Revised 7/20/17cc