




**Listing of Dates for Observations, Meetings with Teacher, Remediation Team Discussions, etc.**

<b>Observations Conducted and by Whom:</b>	<b>Meetings Held with Teacher and by Whom:</b>	<b>Remediation Team Meeting Dates:</b>

*Developed by Dr. Paul M. Healey, PAESSP Executive Director*

**My signature represents that I have been afforded the right to review and discuss the Improvement Plan and understand the actions needed for improvement.**

**Teacher’s Signature:**

**Date:**

**Supervisor’s Signature:**

**Date:**

*If you use the TIP template in any manner, please give credit to PAESSP.*