

# Wisconsin Student/School Learning Objective Selection/Approval Form

Name or Team of Teachers Being Evaluated	Names of Reviewers	
Content Area/Grade Level(s)		Review Date <i>Mo./Day/Yr.</i>

School Building

Please use additional pages, if necessary, to provide information requested below. Additional guiding questions to support the selection process are located on the Wisconsin Student Learning Objective (SLO) Selection/Approval Rubric

Student Learning Objective (SLO):

Baseline Data and Rationale:  
(*Why did you choose this objective?*)

**Learning Content:**  
(*What content will the SLO address?*)

**Student Population:**  
(*Who are you going to include in this objective?*)

**Interval:**  
(*How long will you focus on this objective?*)

**Assessment/Evidence Source(s):**  
(*How will you measure the outcome of your objective?*)

**Targeted Growth:**  
(*What is your goal for student growth?*)

**Strategies and Support:**  
(*What methods or interventions will you use to support this objective? What instructional support or professional development is necessary to accomplish the objective?*)

Educator/Preparer Signature  ➤	Date Signed <i>Mo./Day/Yr.</i>
Supervisor Signature  ➤	Date Signed <i>Mo./Day/Yr.</i>