**Instructional Coach/ Teacher Partnership Agreement**

**Lochearn School**

**Date**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Coach**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Teacher (s)**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Service required or focus of Project**

**Initial ideas/Thoughts**

**Desired Outcomes**

**How will we measure the effectiveness of our collaboration? What data will we collect and use?**

**Roles and Expectations**

**Coach**

**Teacher**

**How and when will we communicate?**

**Outline of Plan of Action**

**Reflection/Follow Up**