



Specialist Leader of Education Deployment Evaluation: Form C

SLE details:

Name:

School name:

Supported school details:

Supported school name:

Deployment start date:

Time commitment agreed:

Review of progress achieved during the contract

For each of the targets that were identified in the original contract for the deployment, please summarise the **impact** made by the SLE and the **evidence** to support this.

Agreed targets	Progress made and evidence of impact	Rating red: fair amber: good green: excellent

Please evaluate the following using a RAG rating	Rating red: fair amber: good green: excellent
The SLE's role in facilitating support and influencing change	
The overall success of the deployment	

Additional comments (Where unsatisfactory progress has been made, please give reasons.):

Please suggest how the partner/supported school can continue to make improvements in the focus area and the requirements for any additional support:

Signed (SLE):	Date:
Signed (Headteacher or SLT of supported school):	Date:

On completion, please copy for each partner and email to ltodd@wvps.hartlepool.sch.uk on behalf of Together to Succeed.