

Completing the 2014 Assurances for Written Evaluation Systems step by step:

Step 1: Obtain the Assurances Form by downloading it from the CDE Assurances Website

<http://www.cde.state.co.us/educatoreffectiveness/sb-assurances>

Step 2: Complete for form by clicking in the appropriate fields and providing information.

I hereby certify that [Click here to enter district/BOCES name](#) district/BOCES assures the following: (Please check or initial the section that describes the district action.)

1. The school district/BOCES has adopted the following evaluation systems to evaluate their licensed personnel: (Please put a checkmark in the space provided to indicate which evaluation system is being used to evaluate each category of licensed personnel. Use the notes section to provide additional information if desired.)

Licensed Personnel Evaluation Systems 2013/2014 SY	State Model System	Local Evaluation System	Not Employed by District/BOCES	Notes:
Principal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Click here to enter text.</a>
Teacher	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Click here to enter text.</a>
Specialized Service Professional Section 4.04 (2014/2015 SY)	State Model System	Local Evaluation System	Not Employed by District/BOCES	Notes:
School Audiologists	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Click here to enter text.</a>
School Counselors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Click here to enter text.</a>
School Nurses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Click here to enter text.</a>
School Occupational Therapists	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Click here to enter text.</a>

Step 3: Electronically sign the form. Simply provide the form to the appropriate parties and ask them to type their name in the space provided... by doing so, they are electronically signing the document, as shown below: (Click on the "date" line to select the date)

<b>X: /s/Click here to electronically sign as the Superintendent or BOCES ED.</b>	Date.
Superintendent of School District or Executive Director of BOCES	
<b>X: /s/Click here to electronically sign as the School Board President or BOCES Board Chair.</b>	Date.
District School Board President or BOCES Board Chair	
<i>To assist districts and BOCES in completing this form electronically, digital signatures are permitted; simply ensure that the authorized person provides the signature by typing their name in the space provided above.</i>	

Step 4: Once the document has been electronically signed by the required parties, save the document in the following specification: (the first four X's are where you will indicate your District/BOCES number)

XXXX\_DISTRICTorBOCESname\_2014\_Assurances\_FORM

Step 5: Submit the completed assurances form to CDE via TRACKER:

Click below for a step by step guide to using TRACKER

<http://www.cde.state.co.us/sites/default/files/11-30%20How%20to%20Submit%20your%20Assurances%20to%20CDE%20using%20Tracker%20.pdf>

If you have any questions or need support in completing or submitting the assurances form please contact Toby King at [king\\_t@cde.state.co.us](mailto:king_t@cde.state.co.us) or 303.866.6964.