

GSSA Coaching Agreement Between

(GSSA Coach) and (Superintendent)

Both above named parties agree upon the following conditions for performance:

Time Agreement: We will have at least 8 coaching sessions during your first year as superintendent. The first session will be in person. We will decide together how to conduct the remaining sessions. You are welcome to leave messages via email, or voice mail should you wish to share information, action items, or highlights prior to our coaching. Feel free to e-mail me in-between sessions to discuss when you need support.

Coaching Services: The services provided to you by GSSA are coaching. Coaching, which is not advice, therapy or counseling, may address specific personal goals, career or general conditions in your profession. Other coaching services may include brainstorming, identifying plans of action, examining modes of operation, asking clarifying questions, making empowering requests and holding you accountable regarding your established goals.

Duration: I will serve as your GSSA Coach for the first year of your superintendency.

Confidentiality: I commit to you that all information you share with me will be kept strictly confidential. I respect your willingness to be open with me and will treat confidentially any information (consistent with the Code of Conduct for Georgia Educators) you share with me.

Preparation: Please come to each session prepared to participate fully. Complete and return to me your Coaching Prep Sheet prior to our session. A sample will be provided to you.

Shared Responsibility: Having coaching work for you is a shared responsibility. I request that you be responsible for having coaching work for you: Lead the session, ask for what you want, let me know what is working and not working in our coaching partnership. My promise to you is to be totally constructive. I ask your permission to be bold and forthright in coaching you. This is about winning.

Our signatures on this agreement indicate full agreement with the requests and promises above, and complete understanding of the services to be provided.

Superintendent/Date: _____

GSSA Coach/Date: _____