

CENTRAL UNION HIGH SCHOOL DISTRICT
DAY-TO-DAY SUBSTITUTE TEACHER
EVALUATION FORM

SUBSTITUTE'S NAME (Please Print)		DATE(S) COVERED

TEACHER'S NAME (Please Print)		SUBJECT

SECTION A: Evaluation By School Administrator/Site Secretary

RATINGS: **1:Excellent 2:Commendable 3:Satisfactory 4:Needs Improvement 5:Unsatisfactory**
(Leave rating line blank if not applicable or not observed)

1. Is neat, professional, and appropriate in appearance and demeanor.
2. Adheres to CUHSD and individual school policies/curriculum.
3. Displays good classroom management skills as per individual school procedure.
4. Takes appropriate actions regarding student behavior.
5. Seeks assistance when necessary and appropriate.

	1	2	3	4	5

Comments: *(If you have checked off 4 or 5 in any of the above areas, please provide suggestions for improvement)*

SECTION B: Feedback from Absent Teacher

1. Attendance was taken.
2. Lesson plans appear to have been satisfactorily followed.
3. Classroom management.
4. The classroom and materials were left in good condition.
5. The substitute provided adequate written feedback.
6. Student behavior was appropriately handled (if known by teacher).
7. Would be welcome back to substitute.

YES	NO

If you checked "no" for any of the above, please provide suggestions for improvement.

SECTION C: Feedback from Students

Based on physical evident or student reports, this substitute apparently engaged in the following behaviors during the period(s) assigned to cover my class(es): **PLEASE CIRCLE THOSE THAT APPLY**

- Arrived late for class.
- Did not follow the seating chart.
- Used their cell phone/computer for personal business.
- Sat at my desk rather than monitor students during class.
- Left the classroom (students unattended) during class.

- He/she wasted class time.
- He/she was critical of the school or its staff.
- Allowed food, gum or drinks, or had his/her own.
- Did not follow/enforce school policies.

FOR OFFICE USE ONLY

Arrival Time: _____	Departure Time: _____
Were keys returned: YES NO	Did substitute report for assignment during prep? YES NO
Administrator's Name: _____	Signature: _____ Date: _____
Teacher's Name: _____	Signature: _____ Date: _____
Comments: _____	