



SUBSTITUTE EVALUATION FORM



Dear Lead Teachers/Site Supervisors:

Please take a few moments to complete the following evaluation of this Substitute Teacher's performance. The provided information may be used to provide further supports and training and to help determine strengths to further utilize. After completion, please submit this evaluation form to the P-3 Professional Development Program Manager.

Please provide an explanation for each item under "Exceeds" or "Needs Improvement", and any additional feedback, in the comment box below.

Name of Substitute: _____

PERFORMANCE RATINGS	Exceeds Expectations 4	Meets Expectations 3	Skills Emerging 2	Needs Improvement 1
The Substitute's professionalism was: <i>(appropriate clothing, level of talk during class time, use of cell phone, etc.)</i>	<input type="checkbox"/> Good	<input type="checkbox"/> Acceptable		<input type="checkbox"/> Not Acceptable
The Substitute arrived for work:	<input type="checkbox"/> Early	<input type="checkbox"/> On Time		<input type="checkbox"/> Late
Interactions and engagement between the Substitute and the children were:	<input type="checkbox"/> Excellent • frequent • positive • open-ended	<input type="checkbox"/> Good • responsive • timely • appropriate	<input type="checkbox"/> Acceptable • appropriate • infrequent	<input type="checkbox"/> Unacceptable • nonexistent • inappropriate
Interactions between the Substitute and the staff were:	<input type="checkbox"/> Excellent • professional at all times • little to no guidance needed	<input type="checkbox"/> Good • able to follow directions with little guidance	<input type="checkbox"/> Acceptable • appropriate • follows directions with guidance	<input type="checkbox"/> Unacceptable • inappropriate conversation while in the classroom • does not follow directions
Totals:				
			Grand Total:	

Notes/Additional Comments/Explanations for "Exceeds" or "Needs Improvement" (be specific)

Signature/Title of Evaluator: _____

Date: _____ Site: _____