

PLEASANT VALLEY SCHOOL DISTRICT
Substitute Teacher Evaluation Report



SUBSTITUTE TEACHER NAME:

DATE(S) WORKED:

GRADE/SUBJECT

REGULAR TEACHER:

SCHOOL NAME:

SUBSTITUTE’S PERFORMANCE REPORT: *(to be completed by regular teacher and administrator)*

THE SUBSTITUTE TEACHER:	CHECK ONE Teache/ Admin	CHECK ONE Teacher/Admin
Provided appropriate discipline	Satisfactory	Unsatisfactory
Followed lesson plans	Satisfactory	Unsatisfactory
Followed school procedures	Satisfactory	Unsatisfactory
Left room in satisfactory condition	Satisfactory	Unsatisfactory
Left report of day’s activities	Satisfactory	Unsatisfactory
Followed attendance procedures	Satisfactory	Unsatisfactory

TEACHER COMMENTS: Any item checked “unsatisfactory” must be explained below:

Teacher's Signature:

Date:

PLEASE SAVE THIS FORM TO YOUR DESKTOP AND FORWARD VIA EMAIL TO YOUR PRINCIPAL

ADMINISTRATOR SATISFACTORY OPPORTUNITY TO OBSERVE
CHECK ONE: UNSATISFACTORY

PRINCIPAL’S COMMENTS:

SHOULD THE NEED ARISE AGAIN, WOULD YOU LIKE THIS SUBSTITUTE TO RETURN TO YOUR SCHOOL?

YES NO

PRINCIPAL’S SIGNATURE: Type Name

**PRINCIPALS: PLEASE SAVE THIS FORM TO YOUR DESKTOP AND FORWARD VIA EMAIL TO
NTORRES@PLEASANTVALLEYS.D**