



SUBSTITUTE EVALUATION FORM

Part One: Complete and Submit to Site Principal (Information will be shared with the Substitute)

Name of Substitute: _____ Type of Substitute: Classified Certificate

Substituting for: _____ Site: _____

I would like to bring to your attention issues and concerns I have pertaining to the individual who substituted for me or worked with me at our school site. I believe these concerns are serious enough to consider the removal of this individual from the substitute pool at our site.

These are the specific details and concerns I have:

(attach additional pages if necessary)

Signature of Person Submitting

Date

Part Two: Review and Forward to Human Resources

I have reviewed this Guest Teacher Evaluation and I am in agreement that the concerns mentioned are serious enough to remove this individual from the substitute pool for our site. I have taken the following action:

I have spoken with the substitute, voicing these concerns and informing him/her of the reasons for my concerns

Date spoken to Substitute: _____

I have not spoken to the Substitute. Reason: _____

Approximate Date to speak with the Substitute: _____

Part Three: Final Action

I approve the removal of this Substitute from this site only. If it was requested, I notified the Substitute of this action.

Assistant Superintendent, Human Resources Signature

Date

Human Resources Only
Initial: _____
Updated on Frontline: _____