

CLASSROOM EVALUATION

- Complete this form and email to blong@calhoun.k12.al.us
- Call your local Kelly branch with any questions or concerns.

| Name | | Date |
|------------------------|---------------|------|
| Full-Time Teacher Name | Grade/Subject | |

| Were the lesson plans provided and readily accessible? Comments: | 🗌 Yes | 🗌 No | |
|--|-------|------|--|
| Were you adequately informed by building staff of classroom procedures or any special circumstances? Comments: | 🗌 Yes | 🗌 No | |
| Were the students polite and courteous? | | | |
| Comments: | 🗌 Yes | 🗌 No | |
| Did you have any students with special problems? If yes, identify the problems: | | | |
| | 🗌 Yes | 🗌 No | |
| Were you adequately informed by school staff of special classes and procedures to take students to and from these classes (music, art, etc.)? Comments: | 🗌 Yes | 🗌 No | |
| Was the school staff helpful and cooperative? | | | |
| Comments: | 🗌 Yes | 🗌 No | |
| Would you like to substitute teach in this class again? | | | |
| Comments: | 🗌 Yes | 🗌 No | |
| What can the school staff do to help substitute teachers in the future? | | | |
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