

**Lakehurst Elementary School
Evaluation for a Substitute Teacher**

Teacher's Name: _____ Date: _____

Substitute's Name: _____

Did the substitute satisfactorily complete the following?

1. Was there an assigned lesson plan on hand? Yes _____ No _____
2. Did students complete their work? Yes _____ No _____
3. Did students exhibit good rapport with the substitute? Yes _____ No _____

If no, please explain: _____

4. Did students turn in their completed assignments? Yes _____ No _____
5. I would request he/she be employed to substitute in my class at another date. Yes _____ No _____

Rating Scale – From 1 to 5 (1 is poor; 5 is excellent)

- | | | | | | |
|---|---|---|---|---|---|
| A. Substitute's rapport with students | 1 | 2 | 3 | 4 | 5 |
| B. Student achievement during classes covered by substitute | 1 | 2 | 3 | 4 | 5 |
| C. Your general satisfaction with the total performance of the substitute | 1 | 2 | 3 | 4 | 5 |

Date: _____ Teacher's Signature: _____

PLEASE COMPLETE AND RETURN TO MRS. DAVIS AT THE END OF THE DAY OF YOUR RETURN TO YOUR TEACHING DUTIES.