



# Human Resource Services

## Substitute Teacher End-of-Day Report

(Via School Office Manager and Regular Classroom Teacher)

Welcome to \_\_\_\_\_ School

Substitute's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Regular Teacher's Name: \_\_\_\_\_ Sub Number: \_\_\_\_\_

Grade / Subject: \_\_\_\_\_ Today's Date: \_\_\_\_\_

**Elementary Curriculum: Were you able to get through everything in the Lesson Plan? If not, please list areas that still need to be covered.**

Language Arts:  Yes  No

Math:  Yes  No

Other:

Were students able to participate in activities scheduled outside the classroom (e.g., PE, Library, Computer Lab, Science, Art)  Yes  No

**Secondary Curriculum: Were you able to get through everything in the Lesson Plan? If not, please list areas that still need to be covered.**

Period 1:  Yes  No

Period 2:  Yes  No

Period 3:  Yes  No

Period 4:  Yes  No

Period 5:  Yes  No

Period 6:  Yes  No

Additional Comments:

**Elementary and Secondary Students**

If students were particularly helpful, please list their names:

If students were unduly disruptive, please list their names and briefly describe the problem/consequences:

General comments about the class:

Please list anything that the teacher or the school office could provide that would be helpful to the next substitute teacher in the future.

Would you like to substitute for this class or other classes here in the future?  Yes  No Please share input.



Please submit this completed form to the office when you turn in your keys and visitor badge. The School Office Manager may verify and approve your on-line substitute jobs in Sub Pay.

*For Principal/Assistant Principal Use Only*