

MESA PUBLIC SCHOOLS
SUBSTITUTE FEEDBACK FORM—SECONDARY LEVEL

Please fill out form and return to the secretary's office at the end of the day along with the key to the classroom.

Substitute Name _____	Telephone No. _____
SFE Job No. _____	Date(s) _____
Teacher Name _____	School _____
Subject Area(s) Taught _____	

1. Were adequate lesson plans and clear instructions provided for you by the teacher? *Please check* Yes No

If no, please comment: _____

2. If applicable, was a current seating chart provided? *Please check* Yes No

3. Were other staff members helpful to you? *Please check* Yes No

4. For each class period taught, please list student absences, general student behavior (give specific instances of disruptive behavior) and a summary of work completed or any deviation from lesson plans. Be specific about any assignments not completed.

The work completed by the students may be found: _____

HOMEROOM *(Not necessarily prior to period 1. Please check with school secretary for actual homeroom time.)*

Student Absences: _____

Student Behavior Comments: _____

Lesson Comments: _____

PERIOD 1

Student Absences: _____

Student Behavior Comments: _____

Lesson Comments: _____

PERIOD 2

Student Absences: _____

Student Behavior Comments: _____

Lesson Comments: _____

PERIOD 3

Student Absences: _____

Student Behavior Comments: _____

Lesson Comments: _____

PERIOD 4

Student Absences: _____

Student Behavior Comments: _____

Lesson Comments: _____

PERIOD 5

Student Absences: _____

Student Behavior Comments: _____

Lesson Comments: _____

PERIOD 6

Student Absences: _____

Student Behavior Comments: _____

Lesson Comments: _____

5. My job would have been easier if _____

6. Suggestions that might improve our efforts to assist the substitute teachers. _____