

Certificated Guest Teacher Performance Evaluation

Guest Teacher's Name (First & Last)			D	Date of Assignment		
School S	Site Grade/	Grade/Subject		TERM AS	SIGNMENT?	
Rating: 4	=Exceeds Expectations; 3=Meets Expectatio	ons; 2=Below Exp	pectations; 1	=Unsatisfa	ctory; or N/A	
I. [Dress/Appearance Professional Clean and Neatly Groomed	If 1 or 2	2 on any rating	g, please co	omment:	
-	meliness Reported on Time Stayed for Teacher's Full Day Performed Teacher's Adjunct Duties					
-	sson Plans Followed Teacher's Lesson Plans Notified Office if Lesson Plans Not Available Used Materials Approved by Principal	9				
Ⅳ. Di: _ _	scipline Exercised Adequate Classroom Control Followed Established Discipline Policy and Classroom Rules Used Appropriate Language	d				
V. Fe _ _	edback Left Adequate Notes for Teacher Left Classroom in Good Condition					
	or Designee's Signature Date TE THIS SECTION IF ONLY FOR "DO NOT US	Teacher's Signa	iture	Da	ate	
Please be	e advised that I wish to have Teachers for □ this school or □ this teac		placed or	n the "DO I	NOT USE" lis	
		ner only.			Revised 04/01/2	