

**Report To Administrator By Substitute Teacher  
Lincoln Public Schools**

Name: \_\_\_\_\_ Substituting for: \_\_\_\_\_

Date: \_\_\_\_\_ Arrival Time: \_\_\_\_\_ Departure Time: \_\_\_\_\_

YES NO

- Were lesson plans available?
- Were students easily identified by name?
- Were lesson plans complete and clear?
- Was Sub Folder available and complete?
- Were books and materials ready and easily available?
- Was emergency information posted and/or readily accessible?
- Was there any deviation from the lesson plan? If YES, please explain.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- Were there any disciplinary problems? If YES, please identify student and the nature of the problem.

STUDENT	PROBLEM
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_____	_____
_____	_____
_____	_____

- Were teachers and/or school staff helpful in providing any assistance that you needed (e.g. beginning of the day, at lunch time)?

- Did you feel welcome at this school? If NO, what could we do to help?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- If you had extra duties, were you informed of these before your assignment began?

- If keys were needed, were they made accessible to you?

- If room assignments were changed, were you informed prior to the beginning of your assignment?

Please provide us with your reaction or comments about your substitute experience at this school. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PLEASE REMEMBER TO FILL OUT THE REPORT TO TEACHER BY SUBSTITUTE FORM**

\_\_\_\_\_  
Substitute Signature

\_\_\_\_\_  
Administrator Signature