

Sahuarita Unified School District #30

Guest Teacher Evaluation & Comment Form

Teacher: _____

School: _____ Grade Level: _____

Date(s) of Absence: _____

Name of Guest Teacher: _____

Please answer the following questions and turn form into the school office:

Were your plans carefully followed?

Yes ___ No ___

Explain (if necessary): _____

Did the guest teacher complete the work as indicated in your lesson plans?

Yes ___ No ___

Explain (if necessary): _____

Were satisfactory teaching techniques used?

Yes ___ No ___

Explain (if necessary): _____

Was attendance taken correctly online through PowerTeacher?

Yes ___ No ___

Explain (if necessary): _____

Did the guest teacher leave the room in good order?

Yes ___ No ___

Explain (if necessary): _____

Do you recommend this teacher be used in the future?

Yes ___ No ___

If the teacher should not be used, please explain. _____

Other Comments: _____

Teacher Signature: _____ Date: _____

ADMINISTRATORS ONLY: Please send completed form to Scott Downs.

If the teacher recommends that this guest teacher not be utilized in the future, and you would like to potentially exclude this guest teacher from your site, it is necessary to contact the Guest Teacher to elicit full details of the predicament. (All Guest Teacher information is available at eSchoolSolutions.)

Notes from conversation with Guest Teacher: _____

Would you recommend the Guest Teacher return to this grade/subject again? Yes: _____ No: _____

Would you recommend the Guest teacher return to your school? Yes: _____ No: _____

Have you notified the Guest teacher of your decision? Yes: _____ No: _____