



**SUBSTITUTE TEACHER REFERENCE FORM**

Applicant's Name: \_\_\_\_\_ Date: \_\_\_\_\_

This applicant named has applied for a substitute teaching position with the Division and has requested that you complete this form and return it to the Board Office as soon as possible. Thank-you.

**KEY:            A – Excellent                    B – Good                    C – Satisfactory                    D - Unsatisfactory**

**PART A**

- 1. Effectiveness of Teaching
- 2. Presentation of Lessons (subject knowledge, preparation, differentiated instruction strategies)
- 3. Commitment to upholding the values of diversity, equity and inclusion
- 4. Teacher/Pupil relations (interest in students, willingness to assist students)
- 5. Initiative (new ideas, new methods, project work)
- 6. Classroom Management

A	B	C	D

**PART B**

- 1. Work Ethic (general deportment in school, dependability etc.)
- 2. Enthusiasm/Commitment to Excellence (attitude to teaching)
- 3. Staff Relations (collaboration, team work, etc.)
- 4. Professional Growth (attitude to personal and professional growth)

A	B	C	D

**PART C**

General Efficiency as a Teacher:

A	B	C	D

- 1. Has this teacher ever been involved in a situation where there were concerns about boundaries with students or co-workers? \_\_\_\_\_
- 2. Weakness of instruction, if any: \_\_\_\_\_
- 3. Strong areas of instruction, if any: \_\_\_\_\_
- 4. Do you recommend this teacher to our staff as a substitute? \_\_\_\_\_
- 5. If a teaching position is available, would you recommend this teacher to our staff? \_\_\_\_\_
- 6. Candidates length of service in your area: \_\_\_\_\_

**REMARKS (use the reverse side if necessary):**

\_\_\_\_\_

\_\_\_\_\_  
Name (print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
School/Address

\_\_\_\_\_  
Position/Occupation

This personal information is collected under the authority of the Public Schools Act and will be used for personnel administration purposes. It is protected by the Privacy provisions of the Freedom of Information and Protection of Privacy act (FIPPA). This will include the ongoing disclosure of your current name, address, and phone number to the appropriate union or association you are a member of. If you have any questions about the collection contact the Access and Privacy Officer, St. James-Assiniboia School Division, 2574 Portage Avenue, Winnipeg, MB R3J 0H8, 204-888-7951.