



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

- 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? _____
- 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