



Office for Catholic Schools
Archdiocese of Seattle

Substitute Follow-up

Please turn in at the end of the day to the school secretary.

Date: _____

Name: _____

Name of *teacher* whose classes were taken: _____

Names of absent students: _____

Were lesson plans adequate? _____

What were concerns? _____

Were there seating charts, class lists or name tags? _____

List any problems with student behavior and nature of the problem. Did you get assistance from another teacher or administration?

Suggestions or comments:

Would you take this class if asked tomorrow? _____ In the future? _____

If this is your first time working the building, be sure to leave your paperwork with the office for your payment. Daily rate: _____

Be sure you keep a record of your substitute days.