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## Exclusion and Evaluation Forms

This [Evaluation Form](#) is to be completed by the school principal, full-time teacher, or other administrator upon completion of a substitute teacher's assignment.

This [Exclusion Form](#) is to be completed by the school principal, full-time teacher, or other administrator.

Please fax the completed form to the Kelly Services office at [20JM@kellyservices.com](mailto:20JM@kellyservices.com).

### Positions Available

- [Substitute Teacher Information](#)
- [Paraprofessional Information](#)
- [HCPS FAQ Sheet](#)

### Training

### Resources

- [School List](#)
- [Exclusion and Evaluation Forms](#)
- [Code of Ethics Florida](#)
- [General FAQ](#)
- [HCPS Directions](#)
- [Substitute Teacher Reference Guide](#)
- [Mandatory Abuse Reporting](#)
- [Substitute Teacher Report](#)
- [Vacancy Requests](#)

### Recognition

- [Substitute of the Month](#)
- [Substitute Events](#)

### Contact Us



## SUBSTITUTE TEACHER EVALUATION FORM

Please fax or e-mail the completed form to the Kelly Services office at 813.574.2814/20JM@kellyservices.com. Thank you for your cooperation and feedback.

<b>Substitute Teacher Name</b>		<b>Date</b>	
<b>Principal Name</b>		<b>School</b>	
<b>Full-Time Teacher Name</b>		<b>Grade/Subject</b>	
<b>Please rate the substitute teacher on the following items:</b>	<b>Yes</b>	<b>No</b>	
Followed lesson plans?	<input type="checkbox"/>	<input type="checkbox"/>	
Provided favorable learning situation?	<input type="checkbox"/>	<input type="checkbox"/>	
Used acceptable methods of control?	<input type="checkbox"/>	<input type="checkbox"/>	
Projected favorable attitude while teaching?	<input type="checkbox"/>	<input type="checkbox"/>	
Left summary of work covered?	<input type="checkbox"/>	<input type="checkbox"/>	
Left the room in an orderly condition?	<input type="checkbox"/>	<input type="checkbox"/>	
Readily adapted to substitute teaching situation?	<input type="checkbox"/>	<input type="checkbox"/>	
Received favorably by students?	<input type="checkbox"/>	<input type="checkbox"/>	
Cooperated with school staff?	<input type="checkbox"/>	<input type="checkbox"/>	
Arrived on time and observed school schedules?	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Strengths:</b>			
<b>Weaknesses:</b>			
<b>Performance Summary:</b> <input type="checkbox"/> Excellent <input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory			
Recommended for continued substitute teacher employment? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>Please answer the following questions regarding Kelly Services:</b>			
Did the Kelly office communicate thorough information to you regarding your needs for this substitute teacher?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Was the Kelly staff helpful and cooperative?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Additional Comments:</b>			