

SUB SUPPORT EVALUATION FORM

Thank you for visiting our building and being a substitute for us today. Please take a moment to let us know how you felt about the support you received today. This will help us continue to improve and make subbing in our building a great experience for you and others.

Your Name:		Teacher Name:			
1. Sub plans were provided and easy to follow and execute:					
	1	2	3	4	
	Strongly Disagree	Slightly Disagree	Slightly Agree	Strongly Agree	
2.	The students and I had the necessary materials to complete the lesson plan:				
	1	2	3	4	
	Strongly Disagree	2 Slightly Disagree	Slightly Agree	Strongly Agree	
3.	Student behaviors were appropriate overall:				
	1	2	3	4	
	Strongly Disagree	Slightly Disagree	Slightly Agree	Strongly Agree	
4.	4. The staff was responsive to my needs:				
	1	2	3	4	
	Strongly Disagree	Slightly Disagree	Slightly Agree	Strongly Agree	
5.	5. I was greeted when entering the building and felt welcomed throughout the day:				
	1	2	3	4	
	Strongly Disagree	Slightly Disagree	Slightly Agree	Strongly Agree	

Additional Comments: