SAN DIEGO CITY SCHOOLS
Human Resource Services Division

CLASSIFIED SUBSTITUTE PERFORMANCE REPORT (NON-CLASSROOM)

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SUBSTITUTE COMPLETES:

Name: _____	Telephone: _____
Employee I.D.: _____ **(Required)**	Substituted For: _____
School Site/Department: _____	Position: _____
	Date(s) of Assignment: _____

SITE ADMINISTRATOR COMPLETES:
(Use the following scale to indicate performance)
Scale 1 – Superior 2 – Effective 3 – Unsatisfactory 4 – Not observed

___ Knowledge of modern office methods and procedures.
___ Ability to organize and maintain clerical records
___ Ability to work independently
___ Ability to use standard office software
___ Organizational Skills
___ Accepts Supervision
___ Staff Relations
___ Use of good judgement
___ Grooming and general appearance

COMMENTS: _____

_____

_____

_____

OVERALL EVALUATION

❑ Superior ❑ Effective ❑ Unsatisfactory

AN UNSATISFACTORY EVALUATION Should be submitted within (10) school calendar days. If reasonably possible, a conference should be held between the administrator and the substitute prior to the placement of this evaluation into his/her personnel record.

❑ DO NOT assign again to site Date of conference: _____

_____
Signature of Administrator/Supervisor

_____ _____
Title Date

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Submit Form To The Following Link (Click To Open Page): DriveUploader Folder

A copy of all superior and/or unsatisfactory evaluations will be sent to the substitute employee by HRSD.