THE SCHOOL DISTRICT OF LEE COUNTY
PERSONNEL SERVICES
2855 COLONIAL BOULEVARD, FORT MYERS FLORIDA 33966

SUBSTITUTE TEACHER EMPLOYMENT REFERENCE FORM

THIS FORM IS NOT CONFIDENTIAL

To be completed by the Applicant:
Applicant Name:

(Name must be provided as shown on the Social Security Card)

_____
(Last) (First) (MI) (Maiden)

Signature_____

Position Applied for: _____**Substitute Teacher**_____

Name of Person Providing Reference:

_____
(First) (MI) (Last)

Signature_____

Title: _____

Company Name: _____

Type of Business: _____

Phone Number _____ - _____ - _____

Relationship to applicant:
***Check one of the following: ___ Current Employer ___Former Employer ___ Supervising Teacher ___College Professor ___ Personal**

***Section 1012.27, F.S., requires that each district must contact each candidate's immediate previous employer before employing.**
Please confirm the following: **To be completed by the Applicant:**

□ This reference is the applicant's current or immediate previous employer. ***(One reference must come from the current or immediate previous employer other than The School District of Lee County.)***

□ Unable to contact the current or immediate previous employer. The applicant must document efforts to contact the employer. If applicable, please provide specific details (include the number of attempts, dates, times, and name(s) of contact and reason, Example of a reason: No longer in existence.) **Applicant will then need to contact the next immediate previous employer.**

_____

_____

To be completed by the person of Reference:

Place an "**X**" in the appropriate column. **N/A** for Not applicable.

	Excellent	Good	Fair	Poor	Not Observed
PERSONAL TRAITS					
Attendance/Punctuality	□	□	□	□	□
Character	□	□	□	□	□
Cooperative	□	□	□	□	□
Dependability	□	□	□	□	□
Dresses Appropriately	□	□	□	□	□
Initiative	□	□	□	□	□
Reliability	□	□	□	□	□
Self-Control	□	□	□	□	□
Sound Judgment	□	□	□	□	□
Tact	□	□	□	□	□

PROFESSIONAL TRAITS					
Ability to Work with Parents/Community	□	□	□	□	□
Classroom Management Skills	□	□	□	□	□
Communication Skills	□	□	□	□	□
Enthusiasm for Teaching	□	□	□	□	□
Instructional Techniques/Methods	□	□	□	□	□
Job Performance	□	□	□	□	□
Knowledge of Subject Matter	□	□	□	□	□
Lesson Planning and Preparation	□	□	□	□	□
Sensitivity to Individual Student Needs	□	□	□	□	□

PLEASE COMPLETE REQUESTED INFORMATION BELOW:

1. Dates of employment or time you have known applicant:

   (month/year) _____/_____ to _____/_____

2. Applicant's position or job title at the time of employment:

   _____

3. Your title at the time you supervised this applicant:

   _____

4. The applicant has applied for the position of Substitute Teacher. Is the applicant suited for this position? _____Yes _____ No

   Explain:_____

5. Do you know of any reason why it would **not** be advisable for this individual to be employed in a capacity where he/she would come in contact with children? _____Yes _____No

   If yes, please explain: _____
   _____
   _____

6. If former employee, why did applicant leave your employ?

   _____

7. Would you hire or rehire this applicant? _____Yes _____No

8. Provide additional comments about this applicant.
   _____
   _____
   _____

PLEASE INDICATE YOUR OVERALL EVALUATION OF THIS APPLICANT BY CHECKING THE APPROPRIATE BOX ON THE SCALE.

EXCELLENT		**GOOD**			**FAIR**			**POOR**	
10	9	8	7	6	5	4	3	2	1