

**BOARD OF EDUCATION, DISTRICT 148
DOLTON, COOK COUNTY, ILLINOIS**

SUBSTITUTE TEACHER REPORT

Return this form to the building principal upon completion of assignment. This form will be initiated by the principal and sent to the business office to process for payment.

Substitute Name: _____

Substituted for: _____ Location: _____ Grade _____

Date(s) Substituted: _____

All Day(s): _____ Half Day(s): _____

Completed teacher lesson plans: YES _____ NO _____ if no, explain

Did you leave a report for the regular teacher as to work covered? YES _____ NO _____
If no, explain:

Unusual difficulty with student discipline: YES _____ NO _____ if yes, explain

Substitute Signature _____

Principal Initials _____

Date _____

Principal comments (if any)

