

**Upper St. Clair School District
Professional Applicant Rating Form**

Overall Rating (Circle One)	
1 Unsatisfactory	3 Good
2 Satisfactory	4 Superior

Name: _____

Interview Date and Time: _____

Certification(s): _____

Position: _____

	Unsatisfactory	Satisfactory	Good	Superior	Remarks:
Instructional:					
A. Educational/Philosophy					
B. Knowledge/Education					
C. Classroom Management					
D. Technology					
E. Oral Expression					
F. Written Communication					
Professional:					
G. Leadership					
H. Teamwork					
I. Judgment					
J. Problem Solving/Decision Making					
K. Planning and Organizing					
L. Innovation					
Personal:					
M. Initiative					
N. Dependability					
O. Adaptability					
P. Self-insight and Development					
Q. Energy and Enthusiasm					
R. Appearance					

Comments: _____

Signature of Rater: _____

Date: _____