

LOS ANGELES UNIFIED SCHOOL DISTRICT Human Resources Division Certificated Assignments and Early Childhood Education

Certificated Day-to-Day Substitute Teacher Inadequate Service Report (ISR)

Substitute's Name:	Employee ID:
School/Region:	Location Code:
Date(s) of Service:	Grade/Subject:
Administrator: Provide detailed information related to the Substitute Attach supporting documentation, if necessary. Please forward the IS Substitute Unit to earlychildhood@lausd.net and the HRIncidentReporting@lausd.net.	
Complete information below before submitting. Principal or Designated Administrator's Signature	 Date
Timelput of Besignated Hammistrator Singulature	Bute
Operations Coordinator's Name	Date Coordinator Notified of ISR
NOTE: Administrator must conference and issue a copy of this report to the the date(s) of the inadequate service. Alleged misconduct and/or performance unit as soon as possible, using this form. Please note that completion of an Is reporting requirements.	e concerns should be reported to the substitute
Conference with employee held on (date): By telephone In Person	
Employee issued a copy of report on (date): Sent by Certified Mail Issued in Person	Employee's Initials: (indicating receipt of report)
Substitute Employee: You may submit a response, within ten (10) working d	

required, the Human Resources Division will contact you directly.