



Student: _____

Teacher: _____

Class: _____

Date: _____

Letter Grade/Percentage (if applicable): _____

Learning Objectives:

Evaluation Criteria

Course Comprehension/Strengths and Suggestions for Improvement:

Interest in Subject:

In-class Participation:

Homework:

Conduct:

Attendance/On-time Arrival:

Teacher's Signature: _____ **Date:** _____

Phone: _____

Email: _____