

Assessment Rubric										
Student Name:					Class Period:					
Assignment:					Date Completed:					
Circle the number in pencil that best shows how well you feel that you completed that criterion for the assignment.					Excellent	Good	Average	Needs Improvement	Rate Yourself	Teacher's Rating
Criteria 1 -	10	9 - 8	7	6 or less						
Criteria 2 -	10	9 - 8	7	6 or less						
Criteria 3 -	10	9 - 8	7	6 or less						
Criteria 4 - Effect: took time to develop idea & complete project? (Didn't rush.) Good use of class time?	10	9 - 8	7	6 or less						
Criteria 5 - Craftsmanship - Neat, clean & complete? Skillful use of the art tools & media?	10	9 - 8	7	6 or less						
Total: 50 x 2 = 100 (possible points)									Your Total	Teacher Total

Student Comments:

Teacher Comments: