

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Class: \_\_\_\_\_

## Student Self Evaluation

### Study Skills

|  |       |           |                  |        |
|--|-------|-----------|------------------|--------|
| I come prepared for class.                                 | Never | Sometimes | Most of the Time | Always |
| I understand the material.                                 | Never | Sometimes | Most of the Time | Always |
| I ask questions if there is something I do not understand. | Never | Sometimes | Most of the Time | Always |
| My homework is complete and turned in on time.             | Never | Sometimes | Most of the Time | Always |
| I put a lot of effort into my schoolwork.                  | Never | Sometimes | Most of the Time | Always |
| I use class time wisely.                                   | Never | Sometimes | Most of the Time | Always |

### Participation

|   |       |           |                  |        |
|---|-------|-----------|------------------|--------|
| I participate in class discussions.         | Never | Sometimes | Most of the Time | Always |
| I am respectful to other students in class. | Never | Sometimes | Most of the Time | Always |
| I follow classroom rules and directions.    | Never | Sometimes | Most of the Time | Always |

I am good at \_\_\_\_\_  
\_\_\_\_\_

I want to work on \_\_\_\_\_  
\_\_\_\_\_