

Evaluation Worksheet – Complete and bring to evaluation

Student Name: _____ Grade: _____

Supervisor Name: _____ Days/Hours Completed: _____
(or Date they will be completed)

Socialization activities/special events/or special awards:

Field Trips of Special interest:

ENGLISH

Number of books read this year: _____

Favorite book and author:

Language Arts/Grammar/Spelling Completed:

Composition/Report:

MATH – Course Title:

Major Topics covered in the course:

SCIENCE/HEALTH – Course(s) Title:

Major Topics covered in each course(s):

Experiments/Activities:

SOCIAL STUDIES/HISTORY –Course(s) Title:

Major Topics covered in each course(s):

Activities/Projects:

OTHER AREAS OF STUDY (Music, Art, Physical Education, Fire & Safety Education)

Please note course title and content on the back of this form