

Name: _____

Date: _____

Student Self-Assessment

Complete the form to evaluate your learning.

I did this well: _____ because _____

I wish I had done better at _____

RATE YOUR LEARNING IN EACH AREA. TELL WHY YOU GAVE YOURSELF THAT RATING.

1 - I did more than expected.

2 - I usually did what was expected.

3 - I had difficulty meeting the expectations.

PLANNING FOR LEARNING

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- brings materials
- completes homework
- is ready to learn

BEING A LEARNER

☐

- shares ideas
- listens carefully
- remains on task

MEETING LEARNING GOALS

☐

- demonstrates learning
- shows quality work

What I will do to become a better learner: _____

Student Signature

Teacher Signature

Parent Signature