

Class: _____ Teacher: _____ Date: _____

Class Assessment Sheet				
Student Name	Homework	Participation	Speaking	Listening
			Writing	Reading
1.	Incomplete / Complete	Low / average / Good	NI / OT / EX	NI / OT / EX
2.	Incomplete / Complete	Low / average / Good	NI / OT / EX	NI / OT / EX
3.	Incomplete / Complete	Low / average / Good	NI / OT / EX	NI / OT / EX
4.	Incomplete / Complete	Low / average / Good	NI / OT / EX	NI / OT / EX
5.	Incomplete / Complete	Low / average / Good	NI / OT / EX	NI / OT / EX

6.	Incomplete / Complete	Low / average / Good	NI / OT / EX	NI / OT / EX
7.	Incomplete / Complete	Low / average / Good	NI / OT / EX	NI / OT / EX
8.	Incomplete / Complete	Low / average / Good	NI / OT / EX	NI / OT / EX
9.	Incomplete / Complete	Low / average / Good	NI / OT / EX	NI / OT / EX
10.	Incomplete / Complete	Low / average / Good	NI / OT / EX	NI / OT / EX

11.	Incomplete / Complete	Low / average / Good	NI / OT / EX	NI / OT / EX
12.	Incomplete / Complete	Low / average / Good	NI / OT / EX	NI / OT / EX
13.	Incomplete / Complete	Low / average / Good	NI / OT / EX	NI / OT / EX
14.	Incomplete / Complete	Low / average / Good	NI / OT / EX	NI / OT / EX
15.	Incomplete / Complete	Low / average / Good	NI / OT / EX	NI / OT / EX

16.	Incomplete / Complete	Low / average / Good	NI / OT / EX	NI / OT / EX
17.	Incomplete / Complete	Low / average / Good	NI / OT / EX	NI / OT / EX
18.	Incomplete / Complete	Low / average / Good	NI / OT / EX	NI / OT / EX
19.	Incomplete / Complete	Low / average / Good	NI / OT / EX	NI / OT / EX

NI – Needs Improvement / OT – On Track / EX - Excellent

Class: _____ Teacher: _____ Date: _____

Individual Assessment Sheet			
Student:	Teacher:	Date:	
Overall Performance			
Weakness		Strength	
<ul style="list-style-type: none"> ❖ ❖ ❖ ❖ ❖ 		<ul style="list-style-type: none"> ❖ ❖ ❖ ❖ ❖ 	
Skills Evaluation			
Speaking	Writing	Reading	Listening
NI / OT / EX	NI / OT / EX	NI / OT / EX	NI / OT / EX
Recommendations for Improvement			
<ul style="list-style-type: none"> ❖ ❖ ❖ ❖ ❖ 			

