

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

## Quarter 2/Semester 1 Grade Checklist/Reflection

**Attendance** – Has your attendance been regular?      Yes    No

Number of Class/Periods Absent: \_\_\_\_\_ Class/Periods Late: \_\_\_\_\_

Has attendance affected your grade?      Yes    No

Grades: A's \_\_\_\_\_ B's \_\_\_\_\_ C's \_\_\_\_\_ D's \_\_\_\_\_ F's \_\_\_\_\_ Other \_\_\_\_\_

**Makeup Work** – If you have had to be absent from school, have you completed all makeup work?      Yes    No

**Materials** – Have you brought all necessary materials to class each day?

Pen/pencil	Sometimes	Always	Never
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Paper	Sometimes	Always	Never
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Notebook	Sometimes	Always	Never
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Class Book	Sometimes	Always	Never
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**Assignments** – Have you completed all assignments and turned them in on time?

Sometimes	Always	Never
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When confused or unsure about an assignment, I \_\_\_\_\_

\_\_\_\_\_.

The time I spend studying and completing assignments has been enough?

Sometimes	Always	Never
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**Attitude** – Have you had a positive attitude in class?

Sometimes	Always	Never
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**My behavior** interferes with class instruction?

Sometimes	Always	Never
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My behavior interferes with understanding of assignments?

Sometimes	Always	Never
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**I am** focused on the teacher and the assignment in each class?

Sometimes	Always	Never
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