

Name _____ Term/Semester _____ Class _____

Date _____ Absences _____

Attitudes		
Homework		
Listening		
Speaking		
Reading		
Writing		
Other comments/suggestions	Overall grade	
Student's comments		
Parent's comments		

Teacher's signature _____ Parent's signature _____

Name _____ Term/Semester _____ Class _____ Date _____ Absences _____					
	Very good	Good	Satisfactory	Try harder	Comments
Listening	☐	☐	☐	☐	
Speaking	☐	☐	☐	☐	
Reading	☐	☐	☐	☐	
Writing	☐	☐	☐	☐	
Interest	☐	☐	☐	☐	
Effort	☐	☐	☐	☐	
Co-operation	☐	☐	☐	☐	
Class participation	☐	☐	☐	☐	
Homework	☐	☐	☐	☐	
Presentation of work	☐	☐	☐	☐	
Overall comments					
Student's comments					
Parents' comments					
Teacher's signature _____ Parent's signature _____					

