

Student Progress Evaluation

NAME: _____ **COURSE:** _____

* Please fill out this form for any student whose progress you feel warrants either special recognition for achievement or requires intervention by the Dean's Office.

* Please check all that apply and feel free to write additional pertinent comments.

1. Attendance:

- | | |
|--|---|
| <input type="checkbox"/> on time | <input type="checkbox"/> absent once in a while |
| <input type="checkbox"/> occasionally late | <input type="checkbox"/> absent very often |
| <input type="checkbox"/> always late | <input type="checkbox"/> does not show up for class |
| <input type="checkbox"/> other _____ | |

2. Participation:

- | | |
|---|---|
| <input type="checkbox"/> well prepared, asks questions, answers questions, pays attention | <input type="checkbox"/> never prepared for discussion |
| <input type="checkbox"/> sometimes well prepared while other times not | <input type="checkbox"/> lacks knowledge from other areas |
| <input type="checkbox"/> other _____ | |

3. Behaviour:

- | | |
|---|---|
| <input type="checkbox"/> talks during class | <input type="checkbox"/> leaves class for extended period of time |
| <input type="checkbox"/> falling asleep | <input type="checkbox"/> behaves unprofessionally toward colleagues |
| <input type="checkbox"/> reads other subject books in class | |
| <input type="checkbox"/> other _____ | |

4. Knowledge:

- | | |
|--|--|
| <input type="checkbox"/> comprehends the material quickly | <input type="checkbox"/> directly in comprehending basic knowledge |
| <input type="checkbox"/> able to relate the material to other subjects | |
| <input type="checkbox"/> constant improvement on examinations | <input type="checkbox"/> fluctuating progress on examinations |
| <input type="checkbox"/> has areas that need a little improvement | <input type="checkbox"/> poor examination results |
| <input type="checkbox"/> other _____ | |

