

Student Process and Product Evaluation Form

Name: _____ School: _____

Grade: _____ Date: _____

Type I Activities

Interest Centers: _____

Speakers: _____

Field Experiences: _____

Media: _____

Computer Work: _____

Comments:

Type II Activities

- | | | |
|--------------------------------------|---|---|
| <input type="checkbox"/> Fluency | <input type="checkbox"/> Evaluation | <input type="checkbox"/> Classification |
| <input type="checkbox"/> Flexibility | <input type="checkbox"/> Observation | <input type="checkbox"/> Hypothesizing |
| <input type="checkbox"/> Elaboration | <input type="checkbox"/> Interpretation | <input type="checkbox"/> Comparison |
| <input type="checkbox"/> Originality | <input type="checkbox"/> Appreciation | <input type="checkbox"/> Awareness |
| <input type="checkbox"/> Analysis | <input type="checkbox"/> Commitment | |
| <input type="checkbox"/> Synthesis | <input type="checkbox"/> Values Clarification | |

Comments:

Type III Activities

Individual or Group Project: _____

Topic of Study: _____

Method of Inquiry: _____

Product: _____

Audience: _____

Comments: _____

Enrichment Clusters

Mentors