

Teamwork Evaluation

Name: _____ Date: _____

Self-Grade

Circle the number that best describes your efforts on the project today/this week.
(0 = no contribution, 1 = very little effort, 2 = some effort, 3 = full effort)

0 1 2 3

Team Member Grades

Write each team member's name and circle the number for their efforts on the project today/this week.
(0 = no contribution, 1 = very little effort, 2 = some effort, 3 = full effort)

_____ 0 1 2 3

_____ 0 1 2 3

_____ 0 1 2 3