

## Evaluation Sheet

Student Name:	
Student Surname:	
Activity Title:	
Date and Place:	
Responsible Teacher:	

A = Poor, B = Moderate, C = Good, D = Excellent

1. Understanding of the educational problem

A ☐ B ☐ C ☐ D ☐

2. Participation in the activities

A ☐ B ☐ C ☐ D ☐

3. Cooperation with the group

A ☐ B ☐ C ☐ D ☐

4. Effort during the activities

A ☐ B ☐ C ☐ D ☐

5. Understanding of digital programs

A ☐ B ☐ C ☐ D ☐

**6. Ability to use creativity.**

**A** ☐      **B** ☐      **C** ☐      **D** ☐

Comment on the student's general presence in the classroom: