

Quick Peer Evaluation Form

Name _____ Class Period _____ Date _____

Write the names of your group members in the numbered boxes. Then, assign yourself a value for each listed attribute. Finally, do the same for each of your group members and total all of the values.

Values: 5=Superior 4=Above Average 3=Average 2=Below Average 1=Weak

Attribute	Myself	1.	2.	3.	4.
Participated in group discussions.					
Helped keep the group on task.					
Contributed useful ideas.					
How much work was done.					
Quality of completed work					
Totals					

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Group Self Evaluation Checklist

Name _____ Class Period _____ Date _____

Topic of Study _____ Group Members' Names _____

As a team, decide which answer best suits the way your team worked together. Then, complete the remaining sentences.

We finished our task on time, and we did a good job!

YES NO

We encouraged each other and we cooperated with each other.

YES NO

We used quiet voices in our communications.

YES NO

We each shared our ideas, then listened and valued each other's ideas.

YES NO

We did best at

Next time we could improve at

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