

# FRIDAY SHEET

**Name:** \_\_\_\_\_ **ID#:** \_\_\_\_\_ **Date:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

CLASS	Has materials, prepared for class.	Turned in homework assignments.	Homework complete & accurate.	Completed work assigned in class.	Stayed on task/paid attention.	Participated appropriately in discussion &/or activities.	QUIZ	TEST	TEACHER'S
	Grades this week.	Grades this week.	Signature/Initials						
English	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never			
Math	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never			
History	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never			
Science	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never			
PE/ROTC	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never			
Elective	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never			
Elective	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never			
Elective	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Seldom <input type="checkbox"/> Never			

**MAY INCLUDE LIST OF NEXT WEEKS ASSIGNMENTS**

**English**

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**Math**

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**History**

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**Science**

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**PE/ROTC**

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**Elective**

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**Elective**

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