WEEKLY PROGRESS REPORT

Teacher's Name:_____Week Ending_____

Please rate students in each of the categories using the following scale. Include only the students who are not completing work at a satisfactory level. Please turn in this sheet each week, even if you do not list students, so I will know we have not misplaced a form.

3 – needs immediate improvement. Student will not earn full credit if work does not improve.

2 - needs to improve work effort, improve attitude, or turn in a missing assignment.

1 - needs to see the teacher about assignments or work that has been missed.

NAME	ASSIGNMENTS	WORK HABITS	ATTITUDE	COMMENTS