Name: _____ Week of: _____

Study Skills 7 Weekly Points

	Monday		**Tuesday**		**Wednesday**		**Thursday**		**Friday**	
	Me	Ms. S	Me	Ms. S	Me	Ms. S	Me	Ms. S	Me	Ms. S
Did I have my planner and materials?										
Did I do my best to complete my chosen/assigned work efficiently?										
Did I work cooperatively with my peers and teachers?										
Was I respectful towards others?										
Daily Total (4)										

Weekly Total:_____

Study Skills 7 Weekly Points

Reflection

One area I did well in this week is: _____

One area I need to work on for next week is _____

Communication

I emailed _____ what I need to work on and what I did well with on _____.

(Parent/guardian) (Date)