

Student: _____

Week/Chapter: _____

Problem:
<u>Grading: (Max. 10 pts.)</u>
Accuracy of Drawing:
Completeness:
Total Score:
Comments:

Problem:
<u>Grading: (Max. 10 pts.)</u>
Accuracy of Drawing:
Completeness:
Total Score:
Comments:

Problem:
<u>Grading: (Max. 10 pts.)</u>
Accuracy of Drawing:
Completeness:
Total Score:
Comments:

Problem:
<u>Grading: (Max. 10 pts.)</u>
Accuracy of Drawing:
Completeness:
Total Score:
Comments:

Problem:
<u>Grading: (Max. 10 pts.)</u>
Accuracy of Drawing:
Completeness:
Total Score:
Comments:

Problem:
<u>Grading: (Max. 10 pts.)</u>
Accuracy of Drawing:
Completeness:
Total Score:
Comments: