

Week: _____

From ____/____/____ to ____/____/____

Subject	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Bible						
Language Arts						
Reading						
Science						
History						
Art & Music						
Health & Exercise						
Math						
ASL						

Total Hours: _____

“Our Family Way” Character Evaluation

(E=Excellent, N=Needs Improvement, U=Unacceptable)

Did I display a good attitude?

Did I use good manners and etiquette?

Did I try my best?

Did I follow instructions?

Did I refrain from complaining and negativity?

Was I respectful to everyone around me?

Was I diligent and focused on my work?

Did I think of others first?

Monday:

Tuesday:

Wednesday:

Thursday:

Friday:

Saturday:

Sunday: