

Peer Classroom Assessment Template

Class/Project Title:

Date:

Peer Assessed:

Your Name:

Assessment Criteria

Criteria	Comments	Score (1-5)
Participation	<input type="text"/>	<input type="text"/>
Collaboration	<input type="text"/>	<input type="text"/>
Quality of Work	<input type="text"/>	<input type="text"/>
Communication	<input type="text"/>	<input type="text"/>

Strengths Observed:

Areas for Improvement: