

Self-Assessment in Latin/Latin and Greek

Date _____

Name of Pupil: _____ **Form** _____

1. I can translate a story without looking up many words.

Pupil A B C D

Teacher A B C D

2. I understand the grammar and use it when translating.

Pupil A B C D

Teacher A B C D

3. My contributions in class are useful and accurate.

Pupil A B C D

Teacher A B C D

4. I know and understand the set texts.

Pupil A B C D

Teacher A B C D

- A = I strongly agree with this statement
- B = I agree with this statement
- C = I have some weaknesses in this area
- D = I disagree with this statement

Pupil's Comment (Target for Improvement)

Parent's Signature.....**Teacher's Initials**.....