Daily Checklist

Book Title:			Name				
	o member han ber of page ate box. If a she did not a	s his/her reas or chapters by group me complete the appropriate bowed 2 minus.	ding log signs) place a place a place as not assigned report. Do this	aned (meaning the control of the con	ng they have upper right her reading e a minus (- ning of each	e read the hand corner log signed in the upper group meet	of or ting.
Grade daily a 3=Good pa Student was	articipatio	n			T OFF TAS	K ONE TIM	IE.
2=Mediun Student was			g to the disc	ussion. OFI	F TASK 1-3	TIMES.	
1=Little pa Student was TIMES.	_		ing his/her j	ob <u>or </u> OFF T	TASK MOR	E THAN 3	
0=No part	icipation ework not co	omplete, sep	arate yourse	elf from grou	up to comple	ete assignme	nt.
Place work session	e the assigne n.	ed number i	in the appro	opriate box Date	at the end	of the group)
Name							
Discussion director's initials							