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| **Grade:** | **Section:** | **Worksheet Number:** |
| **Subject:** |  | **Topic:** |  |
| **Name of teacher:** |  | **Submission date:** |  |
| **Date :** | **Name of student:** |  |

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|  | Target statements or Learning Objectives | Always | Mostly | Sometimes | Rarely |
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| 2. |  |  |  |  |  |
| 3. |  |  |  |  |  |
| 4. |  |  |  |  |  |
| Teacher’s signature | Parent’s Signature |