CCPSP Elementary Semester Evaluation

(Kindergarten thru 6th grades)

Semester ending: _____ Year: _____

STUDENT'S NAME: _____ **AGE:** _____ **GRADE:** _____
First Last

Bible: _____

_____

Reading: _____

_____

Language Arts: _____

_____

Math: _____

_____

Science: _____

_____

History/Geography: _____

_____

Art/Music: _____

_____

Physical Education: _____

_____

Other: _____

_____

Additional Comments: _____

_____

_____

_____