

# NOTEBOOK ASSESSMENT, EXAM FOUR

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Your Name: \_\_\_\_\_ Class Section: 1    2    3

- *All items will be reviewed for completion*

SECTION ONE: CLASS ACTIVITIES & LABS		
Item	Exam Four Completion Score	Exam Four Missing
LCM Activity	/5 points	
LAB 7	/10 points	
LAB 8	/10 points	
LAB 9	/10 points	

- *All sections will be reviewed for organization & appropriate filing of coursework*

STORY	
PORTFOLIO	
JOURNAL	
EXAM	
GENERAL NB	

**Please place this form as the first page of your notebook when you turn your notebook in at the beginning of Exam Four.**

- **Please fill in your name and class section.**

**REMEMBER: Only organized notebooks with empty binder pockets will be checked.**