SELF-ASSESSMENT GEOMETRIC SHAPES

1. Did I write my name, surname and date?	Yes	No
2. Did I write the title?	Yes	No
3. Did I draw freehand?	Yes	No
4. Do all the figures have the required shape?	Yes	No
5. Did I use the rubber as little as possible?	Yes	No
6. Did I make the straight lines when needed?	Yes	No
7. Did I write the names correctly without mistakes?	Yes	No
8. Is it well presented?	Yes	No
9. Do I like the result?	Yes	No
10. Did I finish the task on time?	Yes	No

LIVEWORKSHEETS