Student Chinese Evaluation Form

Student Name:								
Teacher Name:								
How many years have yo	u taught this st	tudent:						
Final Courses Grades in th	ne Last 3 Years	(Number	Grac	de)				
Year	Spring		Fall			Average		
Chinese Evaluation for th	e Last Three Ye	ears (Lette	er Gra	ade)				
Year	Listening	Speaki	ng	Reading	Writing		Average	
Teacher Comments:								
Signature of Teacher:								