Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Personal Report**

Directions: Every Friday class day the form below is due. Please fill it out completely and if there is anything else you would like to say, please use the back of the form.

|  |  |
| --- | --- |
| What did I DO? |  |
| What did I LEARN? |  |
| What did I find INTERESTING? |  |
| What would I do DIFFERENTLY? |  |