

Laboratory Experiment Skills Assessment Sheet

Student Name: _____

Date: _____

Experiment Title: _____

Assessor: _____

Skills Assessment

Skill Area	Criteria	Rating (1-5)	Comments
Preparation			
Equipment Handling			
Safety Procedures			
Observation & Measurement			
Data Recording			
Analysis			
Clean up			

Overall Comments

Assessor Signature: _____

Date:
