

Final Assessment Schedule

January 23rd through January 27th, 2023


Student Name: _____

Advisory: _____

Date	Course Name	Schedule	Type of assessment	Details from Teacher (Format/Topics/Units, etc.)	Teacher/ Student Suggestions for study/preparation
Friday January 20 th	FINAL DEADLINE FOR MAJOR SUMMATIVE ASSESSMENTS				
Monday January 23 rd	Period 1	9:00 am Arrival Time 9:15 am Start Time	<input type="checkbox"/> Paper & pencil <input type="checkbox"/> Project/Product <input type="checkbox"/> Presentation <input type="checkbox"/> Conversation <input type="checkbox"/> Observation/Task		
	Period 2	12:45 pm Arrival Time 1:00 pm Start Time	<input type="checkbox"/> Paper & pencil <input type="checkbox"/> Project/Product <input type="checkbox"/> Presentation <input type="checkbox"/> Conversation <input type="checkbox"/> Observation/Task		
Tuesday January 24 th	Period 3	9:00 am Arrival Time 9:15 am Start Time	<input type="checkbox"/> Paper & pencil <input type="checkbox"/> Project/Product <input type="checkbox"/> Presentation <input type="checkbox"/> Conversation <input type="checkbox"/> Observation/Task		
	ELPR	1:00pm			
Wednesday January 25 th	Period 4	9:00 am Arrival Time 9:15 am Start Time	<input type="checkbox"/> Paper & pencil <input type="checkbox"/> Project/Product <input type="checkbox"/> Presentation <input type="checkbox"/> Conversation <input type="checkbox"/> Observation/Task		
Thursday January 26 th	Period 5	9:00 am Arrival Time 9:15 am Start Time	<input type="checkbox"/> Paper & pencil <input type="checkbox"/> Project/Product <input type="checkbox"/> Presentation <input type="checkbox"/> Conversation <input type="checkbox"/> Observation/Task		

Preparation/Study Time Checklist & Calendar

- | | | |
|---|---|--|
| <input type="checkbox"/> Fill in Final Exam dates
<input type="checkbox"/> Fill in Work schedule if applicable
<input type="checkbox"/> Plan for time to organize & collect resources
<input type="checkbox"/> Plan adequate time to prepare/study | <input type="checkbox"/> Take breaks & reward your hard work
<input type="checkbox"/> Eat well and sleep well
<input type="checkbox"/> Have a positive attitude
<input type="checkbox"/> I will leave my phone _____ | <input type="checkbox"/> Test yourself / Form a study group
<input type="checkbox"/> Follow teacher suggestions
<input type="checkbox"/> Space out practice times
<input type="checkbox"/> Other: _____ |
|---|---|--|

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
December 25	26	27	28	29	30	31
January 1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	

Advisory Teacher Check-In

Advisor Initials: _____