

# TECHNIQUE EVALUATION

~~~ GRADING SHEET ~~~



YOUR NAME: \_\_\_\_\_ GRADE \_\_\_\_\_ PERIOD \_\_\_\_\_

|                                              | Eval. #1 | Eval. #2 | Eval. #3 | Eval. #4 | Eval. #5 |
|----------------------------------------------|----------|----------|----------|----------|----------|
| <b>DATE</b>                                  |          |          |          |          |          |
| Feet flat on floor (2 pts)                   |          |          |          |          |          |
| Eyes on screen (2 pts)                       |          |          |          |          |          |
| Back – straight (2 pts)                      |          |          |          |          |          |
| Fingers – curved over home row (2 pts)       |          |          |          |          |          |
| Body – centered in front of keyboard (2 pts) |          |          |          |          |          |
|                                              |          |          |          |          |          |
| <b>TOTAL</b>                                 |          |          |          |          |          |

|                                              | Eval. #6 | Eval. #7 | Eval. #8 | Eval. #9 | Eval. #10 |
|----------------------------------------------|----------|----------|----------|----------|-----------|
| <b>DATE</b>                                  |          |          |          |          |           |
| Feet flat on floor (2 pts)                   |          |          |          |          |           |
| Eyes on screen (2 pts)                       |          |          |          |          |           |
| Back – straight (2 pts)                      |          |          |          |          |           |
| Fingers – curved over home row (2 pts)       |          |          |          |          |           |
| Body – centered in front of keyboard (2 pts) |          |          |          |          |           |
|                                              |          |          |          |          |           |
| <b>TOTAL</b>                                 |          |          |          |          |           |

|                                              | Eval. #11 | Eval. #12 | Eval. #13 | Eval. #14 | Eval. #15 |
|----------------------------------------------|-----------|-----------|-----------|-----------|-----------|
| <b>DATE</b>                                  |           |           |           |           |           |
| Feet flat on floor (2 pts)                   |           |           |           |           |           |
| Eyes on screen (2 pts)                       |           |           |           |           |           |
| Back – straight (2 pts)                      |           |           |           |           |           |
| Fingers – curved over home row (2 pts)       |           |           |           |           |           |
| Body – centered in front of keyboard (2 pts) |           |           |           |           |           |
|                                              |           |           |           |           |           |
| <b>TOTAL</b>                                 |           |           |           |           |           |