

APS105F Project Evaluation Form

Project Title _____

Student Name _____ Student Number _____

Instructor Name _____ My ECF Login _____

Comments	Demo TA:	Report TA:
	(C)ompile /5	(C)larity /4
	(R)un /5	(D)esign /4
	(T)horoughness /5	(E)nglish /4
	(O)utstanding /5	(N)eatness /4
	Proposal Mark /10	(T)horoughness /4
	Total /30	Total /20
	FINAL PROJECT MARK	
	/50	

This form is to be placed on the top of your report.

*Please make it plainly visible **without** having to open your report.*