This rubric reflects on your performance during your hockey unit. Please be honest in your opinion about your own personal performance.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Very Good** | **Good** | **Satisfactory** | **Needs Improvement** |
| **Knowledge and understanding**  | * I know ***all*** the required rules of striking games
* I can explain to others ***in detail*** how the game is played
 | * I ***almost*** know all the required rules of striking games
* I can explain to others how the game is played
 | * I know ***a few*** rules of striking games
* I can ***roughly*** explain to others how the game is played
 | * I do ***not*** know any of the rules of striking games
* I find it ***challenging*** to explain to others how the game is played
 |
| **Skills, performance** | * I ***always*** throw and catch the ball with control and accuracy
* I ***always*** hit the ball with direction and power
 | * I ***often*** throw and catch the ball with control
* I ***often*** hit the ball with direction and power
 | * I ***sometimes*** throw and catch the ball with control
* I ***sometimes*** hit the ball with direction and power
 | * I find it ***challenging*** to throw and catch the ball with control
* I find it ***challenging*** to hit the ball with direction and power
 |
| **Social skills** | * I ***always*** work well with all my team- mates
* I ***always*** encourage other teammates
 | * I ***often*** work well with all my teammates
* I ***often*** encourage other teammates
 | * I ***sometimes*** work well with all my teammates.
* I ***sometimes*** encourage other teammates
 | * I find it ***challenging*** to work well with my team- mates
* I find it ***challenging*** to encourage other teammates
 |
| **Participation** | * I ***always*** try my best
* I ***always*** try to improve myself
 | * I ***often*** try my best
* I ***often*** try to improve myself
 | * I ***sometimes*** try my best
* I ***sometimes*** try to improve myself
 | * I do ***not*** try my best
* I find it ***challenging*** to improve myself.
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Teacher’s feedback:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signed:

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