

Name: \_\_\_\_\_

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

# Problem Solving Checklist

Question/Task: \_\_\_\_\_

Criteria	Rarely	Sometimes	Frequently	Always
Understands the problem				
Selects a plan				
Carries out the plan				
Revises the plan when appropriate				
Uses a variety of strategies				
Combines strategies where appropriate				
Synthesizes and summarizes results				
Reflects on the reasonableness of results				

**Comments:**

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