

AVID BINDER CHECKLIST



Student Name _____

Grader Initials _____ Date _____

Agenda/Daily Planner/Calendar _____ / 30

Notes (labeled, annotated, etc.) _____ / 30

Organization _____ / 15

Neatness _____ / 15

No loose papers _____ / 5

Supplies (pencil pouch) _____ / 5

Total _____ / 100

Comments

Agenda/Daily Planner/Calendar _____

Notes _____

Organization _____

Neatness _____

Loose papers _____

Supplies _____
