

Lesson/Skill Name(section number):			DATE:
New Vocabulary:	Word:	My definition:	
	Word:	My definition:	
	Word:	My definition:	
	Word:	My definition:	
Example 1:		Example 2:	
Example 3:		Example 4:	
Feedback Question:	My work/response:		<u>I got it:</u> <input type="checkbox"/> Correct <input type="checkbox"/> Incorrect
Feedback Question:	My work/response:		<u>I got it:</u> <input type="checkbox"/> Correct <input type="checkbox"/> Incorrect
Feedback Question:	My work/response:		<u>I got it:</u> <input type="checkbox"/> Correct <input type="checkbox"/> Incorrect
Short Summary of What I learned/Steps/Helpful Hints:		Questions to ask: 1) 2)	