**Specialty Shop Lab Evaluation**

Specialty Shop Item \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Class Hour\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please list each group members name on the table and evaluate their contribution to the project. Please rate your group members on a scale of 1-5. One being the least helpful, 5 being the most.

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| **Group Members** | **Actively Participated** | **Completed Task Assigned** | **Worked Well with Group** | **Knew their way around kitchen/cooking** | **Spoke during group presentation** | **TOTAL** |
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