

PROBLEM SOLVING

Student

DATE:

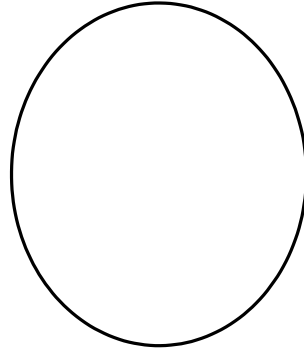
NAME:

Task No.:

Task Name:

Draw your face here to show how you felt about this task.

Add a speech bubble if you wish.



What did you learn from this task?

What do you think you still need to learn?

Anything else?
