

Reactions Prelab

Name:

Period:

General

- | | | |
|--|---|--|
| <input type="checkbox"/> Filled out Headers | <input type="checkbox"/> Labeled Sections | <input type="checkbox"/> Extra sections included that were not asked for |
| <input type="checkbox"/> Footer signed and dated | <input type="checkbox"/> Adequate Spacing | <input type="checkbox"/> Other: |
| | <input type="checkbox"/> Professionalism/Care/Thought | |

Prelab Questions

- ☐ Q 1 --- incorrect --- inadequate --- missing
- ☐ Q 2 --- incorrect --- inadequate --- missing

Materials

- ☐ All relevant materials included

Reagent Table

- ☐ All sections included
- ☐ All chemicals represented

Procedure

- | | |
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| <input type="checkbox"/> In own words, not copied | <input type="checkbox"/> Shortened version |
| <input type="checkbox"/> All numbered steps all represented | <input type="checkbox"/> Drawings of set up included |

General	5	
Prelab Q's	5	
Materials	5	
Reagent Table	5	
Procedure	5	
Total	25	

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