



Your Name: \_\_\_\_\_

Put a check in the column that best describes you.

	Mostly True	Sometimes True	Not True
I care about doing well in school.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I try my best in school each day.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I do my homework.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I understand things that I have read.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I have the things I need for class.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I get along well with my teachers.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I take good notes in class.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am good at taking tests.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I ask and answer questions in class.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am happy with my grades.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

SCORE	Give yourself 2 points for every check in the "Mostly True" column .....	Points
	Give yourself 1 point for every check in the "Sometimes True" column .....	Points
	Give yourself 0 points for every check in the "Not True" column .....	Points
	<b>0 Total</b>	

- If you scored 15--20:** You are a very good student. Keep up the good work!
- If you scored 10--14:** You are doing pretty well. Keep looking for ways to do even better.
- If you scored 5--9:** You are doing OK but could be doing better. Ask your teachers or counselor about ways you can improve your study habits and your grades.
- If you scored 0--4:** You may be struggling in school, but you can get help. Ask your teachers or counselor about how you can do better in school.

**Good Study Habits → Good Grades → Good Career Options → Good Life!**

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