

# Peer Review of Rough Drafts

Names: \_\_\_\_\_ Period(s): \_\_\_\_\_

Project Topic and Title: \_\_\_\_\_

Share your project draft with *at least two other students* in your class (different periods okay). If you have three or more students review your work, use another review form or use the back of this one.

## ***Rough Draft Reviewers:***

- Read the rough draft thoroughly.
- Comment *in writing* (on separate paper or on draft itself if there is room and it is okay with group):
  - Parts you like and/or parts that are very clear.
  - Parts you think are inaccurate or unclear.
  - Questions you have about the problem or topic and/or what you think an observer might ask.
  - Suggestions you have for accuracy, clarity, and creativity.
  - Answer any questions the group has about their own work.
- Be thorough and helpful. Remember, you are the primary check for accuracy before the group finalizes their work.
- Fill out the information below and return this to the project author.

---

**Peer Review #1** by (print name) \_\_\_\_\_ Per.: \_\_\_\_\_

What did you like best?

Primary Suggestions:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

---

**Peer Review #2** by (print name) \_\_\_\_\_ Per.: \_\_\_\_\_

What did you like best?

Primary Suggestions:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_