



Assessment Rubric

Coil Pot

Name: _____

Date: _____

Period: _____

Assessment Rubric						
Student Name:				Class Period:		
Assignment: Coil Pot - Form				Date Completed:		
Circle the number that best shows how well you met the criteria for this assignment.	Excellent	Good	Average	Needs Improvement	Rate Yourself	Teacher's Rating
Criteria 1 – Pottery sides flare out and come back in to form the “shoulder” – piece has a neck and slightly flared lip	25	15	10	5		
Criteria 2 – Widest area is within upper half of coil pot and minimum height is 10”	25	15	10	5		
Criteria 3 – Walls are smooth and uniform in thickness / First and Last Name is on bottom of pot	25	15	10	5		
Criteria 4 – Demonstrates good craftsmanship	25	15	10	5		
Total: 100 (possible points)	Grade:				Your Total	Teacher's Total