

Name:		Project Topic:	
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- These will be submitted in electronic format in a spreadsheet named: **Data_LastName_FirstName.xls**

The count of the elements which are present and properly used will be used to determine the level.

Report Category	Elements	1	2	3	4	4+
Spreadsheet Formatting	<input type="checkbox"/> Spreadsheet named: (insert your own information) Data_LastName_FirstName.xls <input type="checkbox"/> It is an Excel spreadsheet not a Google sheet. [Even worse, if it is a link to a Google sheet, all marks in this category are forfeit] <input type="checkbox"/> Submitted by the end of the period on the due date <input type="checkbox"/> Submitted to the correct folder on the 4Students In Drive <input type="checkbox"/> Replication of at least 30 <input type="checkbox"/> Replication of at least 50 <input type="checkbox"/> Replication of at least 80 (total over all sheets)	2	3	4	5	7
Source #1 Tab	<input type="checkbox"/> Overall Title <input type="checkbox"/> Source <input type="checkbox"/> Data Type Noted (Simulation, Survey, Google Trends, Self-Tracking, Online Source) <input type="checkbox"/> Replication <input type="checkbox"/> Column Headings <input type="checkbox"/> Tab has appropriate title <input type="checkbox"/> Data entered	3	4	5	6	7
Source #2 Tab	<input type="checkbox"/> Overall Title <input type="checkbox"/> Source <input type="checkbox"/> Data Type Noted (Simulation, Survey, Google Trends, Self-Tracking, Online Source) <input type="checkbox"/> Replication <input type="checkbox"/> Column Headings <input type="checkbox"/> Tab has appropriate title <input type="checkbox"/> Data entered	3	4	5	6	7
Source #3 Tab	<input type="checkbox"/> Overall Title <input type="checkbox"/> Source <input type="checkbox"/> Data Type Noted (Simulation, Survey, Google Trends, Self-Tracking, Online Source) <input type="checkbox"/> Replication <input type="checkbox"/> Column Headings <input type="checkbox"/> Tab has appropriate title <input type="checkbox"/> Data entered	3	4	5	6	7