WIST FOLLOWS DIRECTIONS CHECKLIST

Name: _____________________________________________      Date: _______________

ARRIVAL

at least 15 minutes early ................................................................. 1
on time ................................................................. 0
late ................................................................ minus one
had problems following sign-in directions ................................ minus one

For each of the following, give 1 point for each YES and add to arrival score

FOLDER/ APPLICATION

Correctly filled out application YES NO
Brought own copies of documents YES NO

WRITTEN TEST

Filled out answer sheet correctly YES NO
Followed directions for test taking YES NO

Follows Directions SCORE

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