

# Journal Review Form for Students

## Student Information

- Full Name: \_\_\_\_\_
- Student ID: \_\_\_\_\_
- Course Title: \_\_\_\_\_
- Instructor Name: \_\_\_\_\_
- Submission Date: \_\_\_\_\_

## Journal Information

- Journal Title: \_\_\_\_\_
- Author(s): \_\_\_\_\_
- Date of Publication: \_\_\_\_\_
- Journal Issue/Volume: \_\_\_\_\_

## Evaluation Criteria

Please rate the following aspects of the journal article:

Criteria	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Needs Improvement <input type="checkbox"/>
Clarity of Writing				
Relevance to Course				
Depth of Research				
Critical Analysis				
Use of References				

<b>Structure and Organization</b>				
<b>Contribution to Field</b>				
<b>Originality</b>				

**Comments and Feedback**

- **Strengths of the Article:** \_\_\_\_\_
- **Areas for Improvement:** \_\_\_\_\_
- **Additional Notes:** \_\_\_\_\_
- **Would you recommend this journal for class discussion?**  **Yes**  **No**

**Signature**

- **Student Signature:** \_\_\_\_\_
- **Date:** \_\_\_\_\_