

Gray Middle School Reassessment Form

Student Name _____

Class Period _____

Teacher Name _____

Assessment Name/Topic _____

Original Assessment Date _____

Original Assessment Score _____

I understand that this is a single opportunity for me to demonstrate my understanding of the content covered on the last assessment. This plan, if approved by my teacher, earns me the right to be reassessed for full credit. I also understand that this plan must be strictly followed in order for me to be permitted to be reassessed.

Student Signature

Date

Teacher Signature

Date

Parent Signature Requested Not Requested

PART I -- PREPARATION FOR ORIGINAL ASSESSMENT

Completed all assignments/tasks on time	<input type="checkbox"/> YES	<input type="checkbox"/> KIND OF	<input type="checkbox"/> NO	<input type="checkbox"/> N/A
Reviewed /revised prior assignments/tasks	<input type="checkbox"/> YES	<input type="checkbox"/> KIND OF	<input type="checkbox"/> NO	<input type="checkbox"/> N/A
Completed study guide and/or review	<input type="checkbox"/> YES	<input type="checkbox"/> KIND OF	<input type="checkbox"/> NO	<input type="checkbox"/> N/A
Regular attendance in class	<input type="checkbox"/> YES	<input type="checkbox"/> KIND OF	<input type="checkbox"/> NO	<input type="checkbox"/> N/A
Reviewed notes regularly	<input type="checkbox"/> YES	<input type="checkbox"/> KIND OF	<input type="checkbox"/> NO	<input type="checkbox"/> N/A
Had my parents and/or peers reflect/review with me	<input type="checkbox"/> YES	<input type="checkbox"/> KIND OF	<input type="checkbox"/> NO	<input type="checkbox"/> N/A
Paid attention in class	<input type="checkbox"/> YES	<input type="checkbox"/> KIND OF	<input type="checkbox"/> NO	<input type="checkbox"/> N/A
Worked hard in class	<input type="checkbox"/> YES	<input type="checkbox"/> KIND OF	<input type="checkbox"/> NO	<input type="checkbox"/> N/A
Asked questions about material I didn't fully understand	<input type="checkbox"/> YES	<input type="checkbox"/> KIND OF	<input type="checkbox"/> NO	<input type="checkbox"/> N/A

Briefly share the main reasons you feel you did not achieve your desired score or level of mastery on the original assessment.

PART II -- PREPARATION FOR REASSESSMENT

Please check the following method(s) you will use to study or prepare for the reassessment:

- | | | |
|--|---|--|
| <input type="checkbox"/> Review notes taken during class | <input type="checkbox"/> Reread text | <input type="checkbox"/> Revise my notes using the text |
| <input type="checkbox"/> Finish all incomplete work | <input type="checkbox"/> Summarize the text | <input type="checkbox"/> Create a review sheet |
| <input type="checkbox"/> Create vocabulary flashcards | <input type="checkbox"/> Practice skills | <input type="checkbox"/> Revise/edit my work after conferencing |
| <input type="checkbox"/> Receive extra help during GAP | <input type="checkbox"/> Work on this topic/skill during GAP | <input type="checkbox"/> Work with a tutor/intervention specialist |
| <input type="checkbox"/> Review/correct previous assessment | <input type="checkbox"/> Check web sites for additional resources | <input type="checkbox"/> Review rubric and other materials related to assessment |
| <input type="checkbox"/> Study with others prior to reassessment | <input type="checkbox"/> Begin studying more than one day before | <input type="checkbox"/> Other (please explain on back of page) |

PART III -- REFLECTION

Now, in order for you to improve on **future assessments**, something must change. You don't want to complete this process over and over again. Briefly explain **at least three changes** you will make when preparing for **future assessments and** something you have learned from this experience. Please write your response on a separate sheet of paper and attach it to this form.

PART IV -- RETAKE (to be completed by teacher)

Reassessment Date _____

Reassessment Time GAP After school OTHER

Reassessment Score _____

Once you have completed this form and the required work, you have earned the privilege of retaking the assessment. Please attach this completed form to your original assessment, and submit it to your teacher before you take the reassessment.