

## Mrs. S. Rodríguez - Student Relearning/Reassessment Plan

Student's Name: \_\_\_\_\_

Date: \_\_\_\_\_

Teacher's Name: \_\_\_\_\_

Class and Period: \_\_\_\_\_

**What is the name of the major assessment you would like to reassess?**

\_\_\_\_\_

**DIRECTIONS:** *In order to retake a major assessment, you must complete the following steps:*

- 1) Complete this retake ticket.
- 2) Complete all required assignments prior to retake.
- 3) Complete and provide evidence of additional practice (*highlight the option you have selected*)
  - a. Error analysis
  - b. Extra practice
  - c. Tutoring
  - d. Other: \_\_\_\_\_

### STEP 2 : REFLECTIONS

*How did you prepare for the original assessment? Select all that apply*

1. ☐ I did extra practice
2. ☐ I took detailed notes in class
3. ☐ I reviewed my notes
4. ☐ I reviewed assignments from class
5. ☐ I prepared my resources for the assessment
6. ☐ Other: \_\_\_\_\_

*Answer the following questions in complete sentences.*

What skills and concepts did you struggle with the most on this assessment? What were your areas of strength? Why do you feel better prepared for the reassessment?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Why did you not meet the standards on this assessment? Select all that apply.*

- 1) ☐ I did not have the related notes/resources
- 2) ☐ I made careless errors
- 3) ☐ I misread the question
- 4) ☐ I forgot the step(s) needed to do the task
- 5) ☐ I didn't understand the concept when we were learning it in class
- 6) ☐ Other: \_\_\_\_\_

### STEP 3: ACTION

*Complete all required assignments and your additional practice by* \_\_\_\_\_

**SCHEDULED REASSESSMENT DATE/TIME/LOCATION:** \_\_\_\_\_

\_\_\_\_\_

(Student Signature)

\_\_\_\_\_

(Parent Signature)

\_\_\_\_\_

(Teacher Signature)