**Davault Request to Reassess Form**

**Student Name:** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Teacher**: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Subject (Circle one):** Reading LA Math Science Social Studies

**Summative Assessment Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Original Test Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Original Test Score \_\_\_\_\_\_\_\_\_\_**

**Tentative Retake Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\*\*\* Reminder: MOST RECENT SUMMATIVE SCORE WILL BE RECORDED \*\*\***

***-------------------------------------------------------------------------------------------------------------------------------------------***

***Summative Preparation***

**Was all formative work completed prior to the assessment?** Teacher: Yes No

**What did you do prior to taking the summative?** (Mark all that apply.)

|  |  |  |  |
| --- | --- | --- | --- |
|  | No preparation |  | Reviewed Materials/Lesson |
|  | Made a Practice Test/Game |  | Reread/Rewrote Notes |
|  | Made/Reviewed Study Guide |  | Completed Practice Assignments |
|  | Made a Study Calendar |  | Made Flashcards |
|  | Had Someone Quiz You |  | Other (list below): |
|  | Worked in Groups |  |  |

**Be honest in reflecting on your preparation. It will help support a better plan.**

How much total time did you spend preparing?

Do you believe you prepared enough? Why or why not?

**Review your summative. Mark all the areas in which you struggled.**

|  |  |  |  |
| --- | --- | --- | --- |
|  | Following directions |  | Did not know material |
|  | Silly mistakes |  | Other (list below): |

***Relearning Strategy (Student/Parent Proposed Method)***

***Action Plan/Time Management***

Detail your action plan. What are **at least three** things you are going to do to prepare for the retake?

|  |
| --- |
| Specific Activities |
| 1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   (Not specific = I will study.)  (Specific = Sister quizzed me with flashcards; completed extra practice worksheets; etc.) |

Student’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Teacher’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**This form and all evidence of preparation are due on the reassessment date.**