Reassessment request (Physics)

Name:			Today's Date	
Teacher: Mr. McChesney			Class Blocks:	
averag scienti	ging your best score and	most recent score (two uyour grade is determine	t standards, remember that your grade is determined by unique assessments). For habits of mind, lab skills and d by averaging all your scores and your most recent score.	
Reta	ake Policy			
1. 2. 3. 4.	The retake score will ove Student may only retake Student earns retake priv The retake test will not to new assessment will be of Students must make arra at 7:15 AM, during E &	one standard each week. ilege only if all guidelines be identical to the original. over the same standard, it ingements to retake the test	the standard that is retested. Thave been met that are checked below. Studying mistakes from the original test is advised, but while the may be of different length and in a different format. It at least. Retakes will be offered or on Tuesday or Friday mornings school at 3:00 PM (pending teacher availability), or arranged at the teacher and student.	
Evi	dence of Prepara	ation - Teacher	approved plan	
	<u> </u>		essment and will initial once completed. All ssment date for a student to be eligible.	
X	Submit this form and schedule a time to reassess/submit your reassessment within two days (48 hours) of getting back the original assessment.			
	Conferences with teacher during class or E&I			
	Participate in review sessions during E/I with teacher			
	Arrange time before or after school with the teacher for assistance			
	Attend time with teacher until work leading up to the assessment is completed			
	Complete an additional assignment related to the assessment, described below in teacher notes			
		of why you want to reasse	explanation of why original answers were wrong Write a ess, what was learned during the revision process and have this	
I will t	take the reassessment on _	at	and retake the following standard:(time)	
1 am re	equesting the opportunity to	retest and I understand to	he expectations of the reassessment policy.	
Student signature:			Teacher initials:	

Original score on standard: _____ Retake score on standard: ____