SD308 Algebra 1 Unit Assessment Retake Request Form

Student Name:	
Teacher Name:	Class Period:
Unit # of Assessment:	
Date of Assessment:	Original Score:
Why do you believe that you earned an unsatisfactory sco (What went wrong? What was the problem?)	ore the first time that the performance assessment was taken?
	nit assessment that you will retake, is to be completed with t. In addition to this review sheet, mark the optional steps you plan
☐ Identify unit assessment errors and make corrections	
☐ Review notes and class assignments on own	
$\hfill\Box$ Complete practice problems related to the topics	
☐ Review unit quizzes	
☐ Reread all questions and answers before turning in the	e performance assessment
Your retake has been scheduled for	Teacher Signature
Teacher Comments:	
student agrees to thoroughly prepare for the retake by a these skills and concepts. There will only be one oppor	er to retake any eligible unit assessment. By signing this form the asking for help, studying, and making his/her best effort to learn rtunity to retake this assessment. All retakes must take place The higher of the two earned grades will be recorded in the
Student Signature:	Date:
Parent/Guardian Signature:	