

Alternate Learning Plan (Retake Form)

Name:

Grade (Circle): 6 7 8

Summative Retake Information

Summative Content:

Content Teacher:

Summative Title:

Retake Deadline (*To be filled out by content teacher*):

Summative Preparation

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

<input type="checkbox"/>	No preparation	<input type="checkbox"/>	Reread the Selection
<input type="checkbox"/>	Made a Practice Test/Game	<input type="checkbox"/>	Reread/Rewrote Notes
<input type="checkbox"/>	Made/Reviewed Study Guide	<input type="checkbox"/>	Completed Practice Problems
<input type="checkbox"/>	Made a Study Calendar	<input type="checkbox"/>	Made Flashcards
<input type="checkbox"/>	Had Someone Quiz You	<input type="checkbox"/>	Other (list below):
<input type="checkbox"/>	Attended School Support	<input type="checkbox"/>	

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

When did you start to prepare for the summative? (Date)

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		didn't know material
	too challenging		silly mistakes
	wasn't prepared (prior/during assessment)		other (list below)

Relearning Strategy (Student/Parent Proposed Method)

Action Plan/Time Management

Detail your action plan. What are you going to do to prepare for the retake?

Detail the specific times and locations of when and where you will implement your plan. Discuss this with your parents to ensure that there are no unforeseen conflicts. Times should be outside of the school day.

*Put these dates/times/locations into your student planner.

Student's Signature:

Parent's Signature:

Teacher's Signature (Content/Plan Advisor):

FINAL DEADLINE: