



Re-Assess Form

Student Name: _____

“ My great concern is not whether you have failed, but whether you are content with your failure.” Abraham Lincoln

Learning Goal(s)/Topic: _____

Current Score: _____

Date I want to reassess: _____

Done a Retake Before: YES NO

What could I have done better to master the first attempt: _____

Practice strategies I used during practice to improve: _____

☐ Attach your practice log that better prepared you for this reassessment.

Teacher decision:

☐ YES- You are ready to be reassessed

☐ NOT YET- Need a little more practice – use feedback & KEEP MOVING FORWARD!!!