

SHORT ANSWER

2004-2005 Assessment Report

Question No. 1

1. Describe each writing level:

- Copy: Good writing but no ideas
- Imitation: Some ideas but no originality
- Copy: Not in this field yet original!
- Imitation: Good use of ideas

2. I am _____

- _____
- _____
- _____
- _____

3. How do I feel? _____

Feelings or ideas _____

4. Write my name in cursive.

Write your name in cursive. _____

5. Name _____

Write your name in cursive.

- Name _____
- Address _____
- Telephone number _____
- Age _____

6. What is your? _____

What is your? _____

• Name (last, first, middle)	_____
• Address (street, city, state, zip)	_____
• Phone number (home, school)	_____
• Date (month, day, year)	_____
• Age (years)	_____
• Hobbies (reading, sports, etc.)	_____

7. How do you feel? _____

How do you feel? _____

8. How do you feel? _____

How do you feel? _____

9. How do you feel? _____

How do you feel? _____

10. Reading

1	2	3	4	5	6
10	20	30	40	50	60
70	80	90	100	110	120
130	140	150	160	170	180
190	200	210	220	230	240

Read and write the following words:

101	102
103	104
105	106
107	108
109	110

- Read the words in the _____
- Read the words in the _____
- Read the words in the _____
- Read the words in the _____
- Read the words in the _____
- Read the words in the _____
- Read the words in the _____
- Read the words in the _____

11. How do you feel? _____

How do you feel? _____

Read and write the following words:

111	112
113	114
115	116
117	118
119	120

12. How do you feel? _____

13. How do you feel? _____

How do you feel? _____

14. How do you feel? _____

How do you feel? _____

15. How do you feel? _____

- How do you feel? _____
- How do you feel? _____
- How do you feel? _____
- How do you feel? _____

16. How do you feel? _____

How do you feel? _____

17. How do you feel? _____

121	122	123	124	125	126
127	128	129	130	131	132
133	134	135	136	137	138