MI Access™
Michigan's Alternate Assessment Program

MICHIGAN Department of Education

FALL 2011 Functional Independence

Accessing Print and Expressing Ideas

Grades 4&7

Student Answer Document

YOU MUST USE A NO. 2 PENCIL TO COMPLETE ALL SECTIONS

1. Print Student, Teacher, School, and District Information

Student Name: _____ Teacher Name: _____

School: _____ District: _____ Date of Assessment: _____

2. Birth Date

Month	Day	Year
◯ Jan		
◯ Feb		
◯ Mar	0 0	0 0
◯ Apr	1 1	8 1
◯ May	2 2	9 2
◯ Jun	3 3	3
◯ Jul	4	4
◯ Aug	5	5
◯ Sep	6	6
◯ Oct	7	7
◯ Nov	8	8
◯ Dec	9	9

3. Class/Group Number

0	0	0	0
1	1	1	1
2	2	2	2
3	3	3	3
4	4	4	4
5	5	5	5
6	6	6	6
7	7	7	7
8	8	8	8
9	9	9	9

4. Research Codes

I	II
1	1
2	2
3	3
4	4
5	5
6	6
7	7
8	8
9	9

5. Assessment Accommodations: Accessing Print

Mark ALL that apply. See Manual for specific definitions.

- ◯ Reader
- ◯ Audio CD
- ◯ Enlarged Print
- ◯ Other
- ◯ **Nonstandard**

6. Assessment Accommodations: Expressing Ideas

Mark ALL that apply. See Manual for specific definitions.

- ◯ Audio CD
- ◯ Enlarged Print
- ◯ Scribe
- ◯ Word-processed
- ◯ Other
- ◯ **Nonstandard**

7. Report Codes

Mark ALL that apply. See Manual for specific definitions.

- ◯ Home Schooled (**NOT** Homebound)
- ◯ Student Prohibited Behavior

Barcode Label Below

If this barcode is missing, or contains incorrect information, a $10 fee may be charged for processing (see manual for details).

8. Form Number

Print and Mark

FIAE-

REQUIRED: The correct form number **must** be marked in order for the assessment to be scored correctly. The form number may be found in the upper right-hand corner of the booklet cover.

Grade 4	Grade 7
◯ 41	◯ 71
◯ 42	◯ 72
◯ 43	◯ 73
◯ 44	◯ 74
Braille	Braille
◯ 49	◯ 79
Emergency	Emergency
◯ 499	◯ 799

MARKING INSTRUCTIONS

USE A No. 2 PENCIL

Correct ● Incorrect

QAI09106

Barcode Label Above

DO NOT WRITE IN THIS AREA

SERIAL #

Funded by the Michigan Department of Education and the U.S. Education Department.

Functional Independence Student Answer Document

SAMPLE

Student Answer Document

YOU MUST USE A NO. 2 PENCIL TO COMPLETE ALL SECTIONS

Directions: Complete Sections 9 and 10 as described in the ***2011/2012 MI-Access Test Administrator Manual***.

9. Part 1 - Word Recognition

1. Ⓐ Ⓑ Ⓒ	7. Ⓐ Ⓑ Ⓒ	13. Ⓐ Ⓑ Ⓒ	19. Ⓐ Ⓑ Ⓒ
2. Ⓐ Ⓑ Ⓒ	8. Ⓐ Ⓑ Ⓒ	14. Ⓐ Ⓑ Ⓒ	20. Ⓐ Ⓑ Ⓒ
3. Ⓐ Ⓑ Ⓒ	9. Ⓐ Ⓑ Ⓒ	15. Ⓐ Ⓑ Ⓒ	21. Ⓐ Ⓑ Ⓒ
4. Ⓐ Ⓑ Ⓒ	10. Ⓐ Ⓑ Ⓒ	16. Ⓐ Ⓑ Ⓒ	22. Ⓐ Ⓑ Ⓒ
5. Ⓐ Ⓑ Ⓒ	11. Ⓐ Ⓑ Ⓒ	17. Ⓐ Ⓑ Ⓒ	23. Ⓐ Ⓑ Ⓒ
6. Ⓐ Ⓑ Ⓒ	12. Ⓐ Ⓑ Ⓒ	18. Ⓐ Ⓑ Ⓒ	24. Ⓐ Ⓑ Ⓒ

10. Part 2 - Text Comprehension

Passage 1	Passage 2	Passage 3	Passage 4
25. Ⓐ Ⓑ Ⓒ	32. Ⓐ Ⓑ Ⓒ	39. Ⓐ Ⓑ Ⓒ	46. Ⓐ Ⓑ Ⓒ
26. Ⓐ Ⓑ Ⓒ	33. Ⓐ Ⓑ Ⓒ	40. Ⓐ Ⓑ Ⓒ	47. Ⓐ Ⓑ Ⓒ
27. Ⓐ Ⓑ Ⓒ	34. Ⓐ Ⓑ Ⓒ	41. Ⓐ Ⓑ Ⓒ	48. Ⓐ Ⓑ Ⓒ
28. Ⓐ Ⓑ Ⓒ	35. Ⓐ Ⓑ Ⓒ	42. Ⓐ Ⓑ Ⓒ	49. Ⓐ Ⓑ Ⓒ
29. Ⓐ Ⓑ Ⓒ	36. Ⓐ Ⓑ Ⓒ	43. Ⓐ Ⓑ Ⓒ	50. Ⓐ Ⓑ Ⓒ
30. Ⓐ Ⓑ Ⓒ	37. Ⓐ Ⓑ Ⓒ	44. Ⓐ Ⓑ Ⓒ	51. Ⓐ Ⓑ Ⓒ
31. Ⓐ Ⓑ Ⓒ	38. Ⓐ Ⓑ Ⓒ	45. Ⓐ Ⓑ Ⓒ	52. Ⓐ Ⓑ Ⓒ

SAMPLE

DO NOT WRITE BEYOND THIS AREA

DO NOT WRITE IN THIS AREA

Functional Independence
Part 3 - Expressing Ideas

Choose Response Option 1 or 2 for items 53 and 54. Both pages can be used if needed. See details in the ***2011/2012 MI-Access Test Administrator Manual***.

SAMPLE

DO NOT WRITE BEYOND THIS AREA

DO NOT WRITE IN THIS AREA

SERIAL #

Student Name: _____ Teacher Name: _____

USE A No. 2 PENCIL

53. Response Option 1 PROMPT 1

DO NOT WRITE BEYOND THIS AREA

If scribed, initial here: _____

SAMPLE

DO NOT WRITE IN THIS AREA

Student Name: _____ Teacher Name: _____

USE A No. 2 PENCIL

53. Response Option 2 PROMPT 1

SAMPLE

DO NOT WRITE BEYOND THIS AREA

If scribed, initial here: _____

DO NOT WRITE IN THIS AREA

Student Name: _____ Teacher Name: _____

USE A No. 2 PENCIL

54. Response Option 1 PROMPT 2

DO NOT WRITE BEYOND THIS AREA

SAMPLE

If scribed, initial here: _____

DO NOT WRITE IN THIS AREA

SERIAL #

Student Name: _____ Teacher Name: _____

USE A No. 2 PENCIL

54. Response Option 2 PROMPT 2

SAMPLE

DO NOT WRITE BEYOND THIS AREA

If scribed, initial here: _____

DO NOT WRITE IN THIS AREA

SAMPLE

DO NOT WRITE IN THIS AREA

SERIAL #