CC

MI Access™

Michigan's Alternate Assessment Program

CLASS/GROUP ID SHEET

MARKING INSTRUCTIONS

- Use only no. 2 pencil.
- Do NOT use ink or ball point pen.
- Make heavy dark marks that completely fill in the bubbles.
- Erase completely any marks that you wish to change.
- Make NO stray marks on this sheet.

CORRECT MARK

INCORRECT MARKS

1 PLEASE PRINT

Name of Person Completing This Form

District Name

School Name

2 DISTRICT CODE

3 SCHOOL CODE

INSTRUCTIONS: This is an optional form. The purpose of this form is to allow districts and schools to receive reports by class or group designation(s). It is the decision of the district or school to use this option and to define the 4-digit class/group numbers that are most useful to the district or school.

One form needs to be completed for every teacher. It may be completed by the teacher or the district or school coordinator. The person completing this form will need a teacher name and the class/group number(s) assigned to the teacher. Class/Group numbers should be assigned by the district or school coordinator following instructions in the administration manual.

Instructions for each section on the form are as follows:

1. Provide the name of the person completing this form (teacher or district/school coordinator) and the district and school name.
2. In the boxes under DISTRICT CODE, write the district number, mark the corresponding bubbles in the grid. If this information is preprinted, make sure the information is correct. If the information is not correct, contact your school coordinator.
3. In the boxes under SCHOOL CODE, write the school number. Mark the corresponding bubbles in the grid. If this information is preprinted, make sure the information is correct. If the information is not correct, contact your school coordinator.
4. In the boxes under TEACHER'S NAME, write the name of the teacher for whom class/group number(s) are being provided and mark the corresponding bubbles in the grid.
5. In the boxes under CLASS/GROUP NUMBER, write the 4-digit class/group numbers assigned to this teacher and mark the corresponding bubbles in the grid. For teachers who need reporting for multiple groups, up to six (6) different numbers can be included on this form. If less than a 4-digit number is used, enter leading zeros ("0025" as an example).

This form should be delivered to the school coordinator. Instructions for return to the scoring contractor can be found in the 2011/2012 MI-Access Test Administrator Manual.

4 TEACHER'S LAST NAME | **TEACHER'S FIRST NAME**

5 CLASS/GROUP NUMBER

QAI09505

SAMPLE