

Test/Quiz Remediation Form

Staple this completed form to the top of your original test/quiz.

Name _____ Period _____

Which test or quiz are you remediating?: _____

Original Score: _____

You must check this off with your teacher – Do not turn this into the basket

Fill out the following table for each question you missed.

Question # _____	Describe what you did wrong:	
Rewrite question and show how to work the question correctly:	Write down a similar problem and show how to work out the answer correctly:	

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