

Jeff Anderson's Math 105 Quiz and Exam Corrections Correction Form

For detailed instructions on how to complete these exam corrections, please see pages 3 – 5 of this document. On this cover sheet, you will indicate that you have finished each of the necessary steps involved with submitting corrections in this class.

SELF ASSESSMENT CHECK LIST

1. Look at page 2 of this handout. Did you fill out Table 1: Performance Review?

YES

NO

2. For every problem you did not earn full credit on, did you redo the problem to get the correct answer and show your work.

YES

NO

3. Please check to make sure you wrote your solutions in the proper format. Each of the following boxes should be checked:

Corrections written on clean, white paper

Corrections written in order: the first problem you missed is the first problem on your corrections; second problem you missed is written as the second problem on your corrections, and so on.

4. For EACH AND EVERY problem that you did not receive full credit on, did you write a few sentences that specifically identify the mistake(s) you made?

YES

NO

5. Did you finish step 4 of the correction process by visiting the STEM Center Foundations Lab and getting your corrections checked by one of the Foundations Lab instructors.

YES

NO

6. If you have finished all of the steps above, please prepare to submit your corrections packet. Make sure that you follow each of the following formatting guidelines

TOP SHEET: The original graded copy of your quiz or exam

SECOND SHEET: Your quiz or exam corrections including your

THIRD SHEET: Your correction form (pp. 1 - 2 of Math 105 Quiz and Exam Corrections Instructions Document)

Name: _____

Class #: _____

TABLE 1: PERFORMANCE REVIEW							
FILLED OUT BY STUDENT ABOUT 1 st ATTEMPT						FILLED OUT BY JEFF ABOUT CORRECTIONS	
Column 1	Column 2	Column 3	Column 4	Column 5	Column 6	Column 7	Column 8
Problem	Points Possible	Points Earned	Points Missed	Full Credit	NOT Full Credit	Correction Accepted	Correction Rejected
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							
TOTALS							

TABLE 2: SELF ASSESSMENT	
1. Prior to taking this quiz or exam, what was the percent score you wanted to achieve on this assessment? In other words, what was your goal PRIOR to actually taking this quiz or exam?	
2. What percent score did you actually achieve?	
3. Did you achieve your goal for this particular quiz or exam?	
<input type="checkbox"/> YES <input type="checkbox"/> NO	