Summative Reassessment Contract

Name	Date
Class: (circle one) physical education	n / health
Name of Test:	
Grade received on the original test_	
Please explain why you did not mee	t the standards on the original test?
What specific areas do you need to	improve upon?
How do you plan to prepare for the for improvement?	reassessment? What is your plan
Prior to taking the reassessment, yo	u must complete the following:

- Complete and turn in all required assessments for this unit.
- Complete the study guides for each unit.
- Provide evidence of additional studying/preparation for the reassessment (study with peer/parent, review with teacher, study notes, create flashcards, etc.)

This form must be signed by a parent/guardian prior to scheduling a retake. You have one week (five school days) to complete and turn in the required forms with this signed sheet.

Student Signature	Date
Parent Signature	Date