AIG Assessment Data

Student: _____ School: _____
Gender: _____Race: _____Grade: _____ Parent: _____
DOB: _____ Address: _____
SIMS #: _____ _____
SS#: _____ Telephone: Home: _____
Work: _____

Student Ability		Quantitative Assessment		
Test	**Grade**	**Date**	**Composite**	**%**
Test of Cognitive Skills	**3**			
Test of Cognitive Skills	**5**			
Test of Cognitive Skills	**8**			

Student Achievement		Quantitative Assessment				
Test	**Grade**	**Date**	**Reading Score**	**%**	**Math Score**	**%**

NC End of Grade Qualitative Assessment					
Grade	**Year**	**Reading Score**	**%**	**Math Score**	**%**
3					
4					
5					
6					
7					
8					