Bryson Middle School Redo/Retake Plan of Study

Student's Name	Date
I understand that I must successfully complete my "Plan of Study" prior to completing a redo on my assessment. The requirements outlined in the "Plan of Study" must be completed by the deadline assigned by my teacher. In addition, I understand all formative assignments (i.e. IXL, quizzes, homework, classwork) covered on the assessment must be complete before completing the Plan of Study.	
Student Signature	
Parent Signature	
Completion Date for Plan of Study	
Test/Project Grade	
Indicator(s)/Standard(s) Assessed	
Student Reflection	
Based on your performance, you have not mastered the think you can take to improve your understanding of the	
Plan of Study	
Student must complete at least three of the following a	ctions. Check the actions completed.
 Test Corrections with explanation of correct res 	ponses.
Complete Study GuideComplete Quizlet, specified IXL lessons or simi	lar web based review
Attend teacher tutoring sessions: Date	Time
Other (teacher's discretion)	
Teacher Section	
Student Conference Date	
Parent Contact Date	
Plan of Study Complete: Yes No	
Retake Test Date/Time	