Class *Evaluation Test* Report Blackline Master

Name _____ Grade _____

Teacher _____ Date Tested _____

Test Administered: Grade _____ Form _____

Evaluation Test Results Summary

Reading Level	*Below Grade Level*	*On Grade Level*	*Above Grade Level*
Number of Students			

Reading Level	*1-4 minus*	*1-5 to 1-6*	*2-1 to 2-2*	*2-3 to 2-4*	*3-1 to 3-3*	*4-1 to 4-2*	*5-1 plus*
Instructional Number of Students							
Percent of Class							
Independent Number of Students							
Percent of Class							

Student	*Instructional Reading Level*	*Independent Reading Level*

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