

Class *Diagnostic Test* Report Blackline Master



Name _____ Grade _____

Teacher _____ Date Tested _____

Test Administered: Grade _____ Form _____

Diagnostic Test Results Summary

<i>Reading Level</i>	<i>Below Grade Level</i>	<i>On Grade Level</i>	<i>Above Grade Level</i>
Number of Students			

<i>Reading Level or Reading Skill</i>	<i>1-4 minus</i>	<i>1-5 to 1-6</i>	<i>2-1 to 2-2</i>	<i>2-3 to 2-4</i>	<i>3-1 to 3-3</i>	<i>4-1 to 4-2</i>	<i>5-1 plus</i>
Instructional Level Number of Students							
Percent of Class							
Independent Level Number of Students							
Percent of Class							

	<i>Proficient</i>	<i>Developing</i>	<i>Beginning</i>
Sounds-Letters: Consonants Number of Students			
Percent of Class			
Sounds-Letters: Vowels Number of Students			
Percent of Class			
Word Part Clues Number of Students			
Percent of Class			
Vocabulary Number of Students			
Percent of Class			
Comprehension Number of Students			
Percent of Class			

