

**NEW YORK CITY PERIODIC ASSESSMENT PROGRAM
ACUITY ASSESSMENTS
CLASS ROSTER SHEET**

DBN _____

TYPE OF ASSESSMENT (circle one) PREDICTIVE ITA

GRADE (circle one) 3 4 5 6 7 8 9 10 11

SUBJECT (circle one) MATHEMATICS ENGLISH LANGUAGE ARTS

TEST ID (one per Class Roster) _____

ASSESSMENT ADMINISTRATION DATE(S) _____

EDUCATOR NAME _____ **CLASS ID** _____

TOTAL # OF STUDENTS _____

Please list below the names of students who were administered the assessment.

1.	13.	25.
2.	14.	26.
3.	15.	27.
4.	16.	28.
5.	17.	29.
6.	18.	30.
7.	19.	31.
8.	20.	32.
9.	21.	33.
10.	22.	34.
11.	23.	35.
12.	24.	36.

Please write in the number of answer sheets you are returning:

TOTAL # of HAND-CODED Answer Sheets being returned	
---	--

Please note that student data changes made to this sheet will not be reflected in Acuity. All updates to student data must be made directly in ATS or HSST. If you wish to use an ATS daily attendance sheet in place of this Acuity Class Roster Sheet, please make sure to follow the same instructions and include all the information requested on this form.

If necessary, you may print additional copies of this form. After you have completed this form, please return to your Testing Coordinator. Thank you for your cooperation.