

ACTAAP

Arkansas Comprehensive Testing, Assessment, and Accountability Program

Mid-Year End-of-Course Examinations Administration Feedback Form January 2009

Use this form to report any problems that occurred during the January 2009 administration of the Mid-Year End-of-Course Examinations.

District Name: _____

LEA #:

<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>
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Person Responding: _____

Phone Number: _____

FEEDBACK/COMMENTS

Materials Receipt:

Testing Materials/Manuals:

Return of Materials:

Other Issues:

This form may be mailed/faxed to:

Katie Asp
Questar Assessment, Inc.
5550 Upper 147th Street West
Apple Valley, MN 55124
FAX: 866-688-0419

If you have any questions, please call Questar at 800-643-8547 and ask for Katie Asp.