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IDENTIFIERS *Anchor Test Study

ABSTRACT

The Anchor Test Study provides a method for translating a pupil's score on any one of eight widely used standardized reading tests for Grades 4, 5, and 6 to a corresponding score on any of the other seven tests, as well as furnishing new nationally representative norms for each of the eight tests. In addition, the Study presents new estimates of alternate form reliability for each test, provides estimates of the intercorrelations among the tests, and explores empirically some methodological questions in test-equating. Contained in this volume of the Study is the Pretest Information Form which is filled out by school personnel. Information requested on the form includes standardized tests administered in the school, testing schedules, information regarding grade designations, ability grouping, demographic information and socioeconomic status of the students enrolled in that school. In its original form, this volume also contained other information on the administration and processing of the survey. This information was removed to protect the confidentiality of the data. (RC)

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anchor test study

FINAL REPORT

VOLUME XXVIII

PRETEST INFORMATION FORM

December 1972



EDUCATIONAL TESTING SERVICE
PRINCETON, NEW JERSEY
BERKELEY, CALIFORNIA

TM 003 812

This report was prepared under Contract No. OEC-0-71-4758(248) and submitted to the National Center for Educational Statistics, Office of Education, U.S. Department of Health, Education, and Welfare. The contractor was encouraged to exercise professional judgment in its contents; therefore, this report does not necessarily reflect positions and policies of the Government. In particular, no official endorsement of the tests mentioned in the report should be inferred.

ORGANIZATION OF VOLUME XXVIII

Pretest Information Form

PRETEST INFORMATION FORM

Anchor Test Study

OMB # 51-S71047
Expires December 31, 1972

Verify the data printed on this label \longrightarrow
and make any corrections required adjacent to the
incorrect information. After checking the accuracy,
please complete the remainder of this form.

Your school phone — Area Code _____ Number _____

Name of person completing this form _____ Date _____

Please complete items 1 and 2 below by checking the appropriate boxes:

1. On which of the following date(s) do you plan to administer the tests?

Mon., April 17 Tues., April 18 Wed., April 19 Thurs., April 20 Fri., April 21

If testing is not possible on any of these schedule dates or if you have specific problems completing this form, contact Educational Testing Service, Attention: Anchor Test Study Office, at (415) 849-0950, collect, for further instructions.

2. Check any of the following standardized reading tests which have been administered to your current 4th, 5th, or 6th grade pupils during the past (1970-71) school year or during the current (1971-72) school year as a part of your testing program. Also check any of these tests that are scheduled for administration between the present time and June, 1972. The appropriate box(es) should be checked even if only one grade, or even a single class within the grade, falls within these categories. *Important:* please note the test edition dates associated with those tests marked with an asterisk. Do not check the boxes if an earlier edition of these tests was administered.

Have administered in 1970-71
or current school year to date

Intend to administer
prior to June, 1972

*California Achievement Tests (1970 Edition) — CAT (1970)

Comprehensive Tests of Basic Skills — CTBS (1968 Edition)

*Iowa Test of Basic Skills (1970 Edition) — ITBS (1970)

*Metropolitan Reading Tests (1970 Edition) — MAT (1970)

*Sequential Tests of Educational Progress (Series II) — STEP II (1969)

*SRA Achievement Series (1970 Edition) — SRA (1970)

Stanford Reading Tests (1964 Edition)

On the following pages of this form, information is requested regarding classes. **If the standard class structure applies to your school, turn to page 2.**
If the standard class structure does *not* apply to your school, observe the following rules:

1. *Ungraded, "Unclassed," and "Rotating Class" Schools* —

- (1) Students should be assigned for purposes of testing to grades according to the level they would be assigned if they were in a graded school.
- (2) Students within each grade level should be assigned to "testing groups" conveniently sized for test administration. These "testing groups" may be assigned on the basis of "homeroom" (administrative units), alphabetically (last name beginning A-F, G-C, etc.), or any grouping that you prefer to establish.
- (3) A teacher/test administrator should be assigned to each "testing group." List the names of these teachers/test administrators and complete the additional information on pages 2 and 3 of this form.
- (4) Be sure you keep complete files on how students and test administrators were assigned to "testing groups."

2. *Split Session* — certain teachers may have more than one class at the same grade level in split session schools. In these situations, the teacher's name must be entered twice—once for each class—and the number "1" entered in the "Split Session Identification" box adjacent to the teacher's name for the first such class and the number "2" entered in the "Split Session Identification" box adjacent to the teacher's name for the second such class. (If the two classes taught by the one teacher are at different grade levels, each class should be entered under its own grade classification and the "Split Session Identification" box should *not* be marked.) Be sure you maintain a record of *which class was assigned a "1" and which was assigned a "2,"* so that the proper test materials may be distributed when they are sent to you.

Instructions for Completing Pages 2 and 3:

List all of your classes at grades 4, 5, and 6 under the appropriate grade level heading. If one or more of these grade levels do not exist in your school, mark an "X" through the teacher identification area for that grade level. The following information is requested for each class:

Column 1 — *Class/Teacher Identification:* Print or type the name of each classroom teacher (or class identification) *within the area for that teacher's grade.* Some abbreviation may be necessary. Be sure the class/teacher identification is written *within the proper grade level, either 4th, 5th, or 6th grade.*

Column 2 — *Split Session Identification:* This area may be left blank unless certain grade levels in your school are on split sessions and certain teachers have more than one class. See the special instructions for Split Session identification on page 1.

Column 3 — *Number of pupils:* Enter the number of pupils actually enrolled in that teacher's class as of the day you receive this form.

Column 4 — *Physically Handicapped or Mentally Retarded?:* The "yes" box should be checked if this class is a special one separately organized for the physically handicapped or mentally retarded. Otherwise, check the "no" box.

Column 5 — *Ability Grouping:* Some schools establish classroom units *within grades* on the basis of student ability. If pupils have NOT been assigned to this teacher's class on the basis of ability, place a check in the "No Grouping" space. If pupils *have* been assigned to this teacher's class on the basis of ability, place a check in the space that best indicates the class ability level.

If you have more classes than space provided on this form, please attach a listing of the additional classes, using the format shown on pages 2 and 3. Supplementary pages 2 and 3 will be provided if it is possible to establish that a particular school may not have adequate space.

PLEASE PRINT OR TYPE

1 Class/Teacher Identification	2 Split Session Identification	3 Number of Pupils	4 Physically Handicapped or Mentally Retarded?		5 Ability Grouping			
			Yes (1)	No (2)	No Grouping (1)	Yes Grouping		
					Above Average (2)	Average (3)	Below Average (4)	
Class 1	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	—	—	—	—
Class 2	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	—	—	—	—
Class 3	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	—	—	—	—
Class 4	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	—	—	—	—
Class 5	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	—	—	—	—
Class 6	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	—	—	—	—
Class 7	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	—	—	—	—
Class 8	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	—	—	—	—
Class 9	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	—	—	—	—
Class 10	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	—	—	—	—
Class 11	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	—	—	—	—
Class 12	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	—	—	—	—
Class 13	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	—	—	—	—
Class 14	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	—	—	—	—

1
Class/Teacher Identification

2
Split
Session
Identification

3
Number
of
Pupils

4
Physically
Handicapped
or
Mentally
Retarded?

Yes (1) No (2)

5
Ability Grouping
No Grouping (1)
Yes Grouping
Above Average (2) Average (3) Below Average (4)

GRADE 5 CLASSES

Class 1
Class 2
Class 3
Class 4
Class 5
Class 6
Class 7
Class 8
Class 9
Class 10
Class 11
Class 12
Class 13
Class 14

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GRADE 6 CLASSES

Class 1
Class 2
Class 3
Class 4
Class 5
Class 6
Class 7
Class 8
Class 9
Class 10
Class 11
Class 12
Class 13
Class 14

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This page contains three questions that will help to describe your school and the population that it represents. Check the box and/or enter the information that best describes your school.

1. Which one of the following descriptions best defines the location of your school?

- (1) Large city, over 500,000 population
- (2) Large city, over 200,000 population
- (3) Suburb of a large city
- (4) Rural area near a large city
- (5) Middle-size city, 50,000-200,000 population
- (6) Suburb of a middle-size city
- (7) Rural area near a middle-size city
- (8) Small city or town, less than 50,000 population
- (9) Rural area, not near a large or middle-size city

2. Estimate the percentages of pupils who come from households in which the total yearly income from all sources falls within the following ranges (be sure your percentages total 100%):

_____ % under \$3,000
 _____ % \$3,000-\$5,999
 _____ % \$6,000-\$9,999
 _____ % \$10,000 and over

Total 100%

3. Give your best estimate of the percent of pupils in your school who are members of families whose primary means of support is a public welfare program.

- | | | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| None | 1-10% | 11-25% | 26-50% | 51-75% | 76-90% | 91-100% |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| (1) | (2) | (3) | (4) | (5) | (6) | (7) |