

## APPENDIX 7: ITEM REVIEW TRACKING FORMS

### Item Review Form Mathematics

Grade: \_\_\_\_\_

Pg.	Unique ID Number	Status	Content Alignment	Rigor Level Alignment		Technical Design		Universal Design	
		Overall Judgment	GLE	Estimated Difficulty	Depth of Knowledge	Key	Graphics	Language Demand	Bias
		A = approved AR = accept w/ revisions M = move R = rewrite		L = low M = medium H = high	1 = recall 2 = application 3 = strategic thinking				Y = Yes N = No
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
13									
14									
15									

Signature \_\_\_\_\_ Date \_\_\_\_\_      Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Signature \_\_\_\_\_ Date \_\_\_\_\_      Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Signature \_\_\_\_\_ Date \_\_\_\_\_      Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Signature \_\_\_\_\_ Date \_\_\_\_\_      Signature \_\_\_\_\_ Date \_\_\_\_\_



## APPENDIX 8: CONFIDENTIALITY AGREEMENT

---

---

### Alaska Department of Education & Early Development

---

---

*Item Review*  
*July 31, August 1, 2, 3, 2006*

#### CONFIDENTIALITY AGREEMENT

Test security is of the utmost importance to the Alaska Department of Education & Early Development. As a participant in this item review, you have access to test items that must be regarded as confidential. **Do not reproduce or disclose any test items that are generated at this meeting.**

We are certain that you share our concern for test security and ask that you acknowledge your adherence to these guidelines by signing below.

\_\_\_\_\_  
Legal First Name                      MI                      Legal Last Name

\_\_\_\_\_  
School District

\_\_\_\_\_  
Signature    Date



# Alaska Department of Education & Early Development

---

---

## *Bias, Fairness, and Sensitivity Review* *July 31, August 1, 2006*

### CONFIDENTIALITY AGREEMENT

Test security is of the utmost importance to the Alaska Department of Education & Early Development. As a participant in this item review, you have access to test items that must be regarded as confidential. **Do not reproduce or disclose any test items that are generated at this meeting.**

We are certain that you share our concern for test security and ask that you acknowledge your adherence to these guidelines by signing below.

\_\_\_\_\_  
Legal First Name

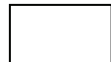
\_\_\_\_\_  
MI

\_\_\_\_\_  
Legal Last Name

\_\_\_\_\_  
School District

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



## **APPENDIX 9: BIAS & SENSITIVITY REVIEW FORM**

### **CSSA**

### **Bias & Sensitivity Review Form**

**July 31 and August 1, 2006**

<b>Name:</b> _____	<b>Date:</b> _____
<b>Subject Area: Mathematics</b>	<b>Grade:</b> _____

**Reminder:** Types of Bias-Gender, Regional, Ethnic, Socio-Economic, Religious, Age, Experiential, Other  
**Attention:** (D) important to discuss (R) suggest rejection

<b>Page #</b>	<b>Passage # or Item #</b>	<b>Article-specific bias/sensitivity/suggestion for change OR Item-specific bias/sensitivity description/suggestion for change</b>	<b>Attention</b>

**GENERAL COMMENTS:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Signature:** \_\_\_\_\_

