

Sounds



1

2



3

4



5

Words



1

2



3

4



5

Name: _____

Date: _____

Retest for Unit No. _____

Page 2

Sentences

1



2

**Retest Grading**

Sounds: _____ / 5

Sentences: _____

Words: _____ / 5

Words: _____ / 5

Marking: _____ / 5

Trick Words: _____ / 5

Score: _____

x 4

Total Score: _____ / 100

☐ Legibility☐ Capitalization☐ Punctuation☐ Phrasing