

Office of Charter Schools

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detroitk12.org/charters

REQUIRED ASSESSMENT FORM

DATE:	
SCHOOL NAME:	, administered the following state
and authorized required assessments.	
Please (v) all boxes that apply.	
☐ MAP/Scantron	
☐ M-Step	
□ WIDA	
☐ Other – Please list	
Completed by:	