

**LEVEL:**

- Common Core  
  First Baccalaureate  
  Second Baccalaureate  
  Other : \_\_\_\_\_

**MODE (S) OF WORK:**

- Individual  
  pair  
  group  
  Other : \_\_\_\_\_  
  In-class  
  Take-home  
  Other : \_\_\_\_\_

**TEST TYPE:**

**PURPOSE OF THE TEST**

**THIS DIAGNOSTIC TEST IS DEVELOPED TO :**

- ⊙ Examine and assess students' current knowledge and application of English grammar, vocabulary, language functions, composition, mechanics, and comprehension skills.
- ⊙ Use diagnostic data (information about testees' points of weakness and strength) with the objective of highlighting the language areas /skills that need remedial intervention.

LEVEL : _____	TEST ASPECT(S) / SECTION COVERED	DATE:	OBSERVATIONS / COMMENTS :
		/ /	
		/ /	
		/ /	
		/ /	
		/ /	
		/ /	

**TICK ( ✓ ) THE ITEMS THAT APPLY. THIS TEST COVERS / INCLUDES :**

- |                                     |                                      |  |  |
|-------------------------------------|--------------------------------------|--|--|
| <input type="checkbox"/> Grammar    | <input type="checkbox"/> Functions   | <input type="checkbox"/> Reading comprehension | <input type="checkbox"/> Listening comprehension |
| <input type="checkbox"/> Vocabulary | <input type="checkbox"/> Composition | <input type="checkbox"/> Speaking              | <input type="checkbox"/> Other : _____           |
- 
- |   |   |  |   |
|---|---|--|---|
| <input type="radio"/> subject / object pronouns | <input type="radio"/> prepositions of place       | <input type="radio"/> English modals             | <input type="radio"/> conditionals                |
| <input type="radio"/> possessive adjectives     | <input type="radio"/> prepositions of time        | <input type="radio"/> gerund / infinitive        | <input type="radio"/> reported speech             |
| <input type="radio"/> numbers & numerals        | <input type="radio"/> wh-words                    | <input type="radio"/> simple present             | <input type="radio"/> language functions          |
| <input type="radio"/> telling time & date       | <input type="radio"/> quantifiers                 | <input type="radio"/> simple past                | <input type="radio"/> composition                 |
| <input type="radio"/> verb <i>to be / to do</i> | <input type="radio"/> comparatives / superlatives | <input type="radio"/> present continuous         | <input type="radio"/> mechanics                   |
| <input type="radio"/> English plurals           | <input type="radio"/> relative pronouns / clauses | <input type="radio"/> past continuous            | <input type="radio"/> essay / article             |
| <input type="radio"/> English articles          | <input type="radio"/> word formation              | <input type="radio"/> present perfect            | <input type="radio"/> e-mail / letter             |
| <input type="radio"/> demonstrative pronouns    | <input type="radio"/> ( other) parts of speech    | <input type="radio"/> present perfect continuous | <input type="radio"/> linking words / transitions |
| <input type="radio"/> possessive adjectives     | <input type="radio"/> regular / irregular verbs   | <input type="radio"/> future tense               | <input type="radio"/> orthography                 |
| <input type="radio"/> reflexive pronouns        | <input type="radio"/> phrasal verbs               | <input type="radio"/> passive voice              | <input type="radio"/> lexicon                     |

**THINKING SKILLS :**

**MULTIPLE INTELLIGENCES :**

**TASK /QUESTION TYPES:**

- |  |  |  |  |  |   |   |
|--|--|--|--|--|---|---|
| <input type="checkbox"/> Remembering   | <input type="checkbox"/> Analyzing     | <input type="checkbox"/> Linguistic    | <input type="checkbox"/> Kinesthetic   | <input type="checkbox"/> True / False    | <input type="checkbox"/> Open question    | <input type="checkbox"/> Classification     |
| <input type="checkbox"/> Understanding | <input type="checkbox"/> Evaluating    | <input type="checkbox"/> Auditory      | <input type="checkbox"/> Logical       | <input type="checkbox"/> Multiple choice | <input type="checkbox"/> Ordering         | <input type="checkbox"/> Fluency / Accuracy |
| <input type="checkbox"/> Applying      | <input type="checkbox"/> Creating      | <input type="checkbox"/> Visual        | <input type="checkbox"/> Interpersonal | <input type="checkbox"/> Matching        | <input type="checkbox"/> Error correction | <input type="checkbox"/> Short answer       |
| <input type="checkbox"/> Other : _____ | <input type="checkbox"/> Other : _____ | <input type="checkbox"/> Other : _____ | <input type="checkbox"/> Other : _____ | <input type="checkbox"/> Gap filling     | <input type="checkbox"/> Translation      | <input type="checkbox"/> Paragraph          |
|  |  |  |  | <input type="checkbox"/> Wh-questions    | <input type="checkbox"/> Dictation        | <input type="checkbox"/> Essay              |

**BEFORE /WHEN ADMINISTERING THE TEST:**

**INSTRUCTOR'S CHECKLIST**

- I clearly stated the purpose of the test to the testees by explaining how their performance data will be used to make informed decisions about instructional strategies and methodology.
- I encouraged them to deal with the test not as a challenge, but rather as an opportunity for everyone to check their readiness and potential to advance through this course and to the next level.
- I had prepared and delivered instructions in direct and simple language to maximize clarity and minimize any probable of confusion.

**DIAGNOSTIC OUTCOME : DESCRIPTION , EVALUATION , & FEEDBACK**

LEVEL: \_\_\_\_\_ Total # of testees : \_\_\_\_\_

<b>GRAMMAR :</b>		<b>MASTERY / PERFORMANCE RELATIVE TO ESTABLISHED EXPECTATIONS OF THE TEST</b>					
Level Achieved by Testees / Total number	<i>Critically Limited</i>	<i>Limited</i>	<i>Basic</i>	<i>Good</i>	<i>Very Good</i>	<i>Excellent</i>	
	0 - 7	8 - 13	14 - 17	18 - 22	23 - 26	27 - 30	
	___ / ___	___ / ___	___ / ___	___ / ___	___ / ___	___ / ___	
<b>FUNCTIONS :</b>		<b>MASTERY / PERFORMANCE RELATIVE TO ESTABLISHED EXPECTATIONS OF THE TEST</b>					
Level Achieved by Testees / Total number	<i>Critically Limited</i>	<i>Limited</i>	<i>Basic</i>	<i>Good</i>	<i>Very Good</i>	<i>Excellent</i>	
	0 - 3	4 - 6	7 - 9	10 - 11	12 - 13	14 - 15	
	___ / ___	___ / ___	___ / ___	___ / ___	___ / ___	___ / ___	
<b>VOCABULARY :</b>		<b>MASTERY / PERFORMANCE RELATIVE TO ESTABLISHED EXPECTATIONS OF THE TEST</b>					
Level Achieved by Testees / Total number	<i>Critically Limited</i>	<i>Limited</i>	<i>Basic</i>	<i>Good</i>	<i>Very Good</i>	<i>Excellent</i>	
	0 - 7	8 - 13	14 - 17	18 - 22	23 - 26	27 - 30	
	___ / ___	___ / ___	___ / ___	___ / ___	___ / ___	___ / ___	
<b>COMPREHENSION:</b>		<b>MASTERY / PERFORMANCE RELATIVE TO ESTABLISHED EXPECTATIONS OF THE TEST</b>					
Level Achieved by Testees / Total number	<i>Critically Limited</i>	<i>Limited</i>	<i>Basic</i>	<i>Good</i>	<i>Very Good</i>	<i>Excellent</i>	
	0 - 3	4 - 6	7 - 9	10 - 11	12 - 13	14 - 15	
	___ / ___	___ / ___	___ / ___	___ / ___	___ / ___	___ / ___	
<b>COMPOSITION :</b>		<b>MASTERY / PERFORMANCE RELATIVE TO ESTABLISHED EXPECTATIONS OF THE TEST</b>					
Level Achieved by Testees / Total number	<i>Critically Limited</i>	<i>Limited</i>	<i>Basic</i>	<i>Good</i>	<i>Very Good</i>	<i>Excellent</i>	
	0 - 1	2 - 3	4 - 5	6 - 7	8 - 9	10	
	___ / ___	___ / ___	___ / ___	___ / ___	___ / ___	___ / ___	
<b>SPEAKING :</b>		<b>MASTERY / PERFORMANCE RELATIVE TO ESTABLISHED EXPECTATIONS OF THE TEST</b>					
Level Achieved by Testees / Total number	<input type="checkbox"/> Doesn't apply.	<i>Critical</i>	<i>Limited</i>	<i>Basic</i>	<i>Good</i>	<i>Very Good</i>	<i>Excellent</i>
		0 - 1	2 - 3	4 - 5	6 - 7	8 - 9	10
		___ / ___	___ / ___	___ / ___	___ / ___	___ / ___	___ / ___
<b>CULTURE :</b>		<b>MASTERY / PERFORMANCE RELATIVE TO ESTABLISHED EXPECTATIONS OF THE TEST</b>					
Level Achieved by Testees / Total number	<input type="checkbox"/> Doesn't apply.	<i>Critical</i>	<i>Limited</i>	<i>Basic</i>	<i>Good</i>	<i>Very Good</i>	<i>Excellent</i>
		0 - 1	2 - 3	4 - 5	6 - 7	8 - 9	10
		___ / ___	___ / ___	___ / ___	___ / ___	___ / ___	___ / ___

<b>Total number of testees :</b>	_____
<b>Highest Score :</b>	_____ / 100
<b>Lowest Score :</b>	_____ / 100

<b>NUMBER OF TESTEES WHO ACHIEVED THE :</b>		
<i>Advanced level</i>	91 - 100	_____
<i>High level</i>	81 - 90	_____
<i>Intermediate level</i>	71 - 80	_____
<i>Above average level</i>	61 - 70	_____
<i>Average level</i>	51 - 60	_____
<i>Below average level</i>	40 - 50	_____
<i>Low level</i>	01 - 30	_____

**I'd evaluate whole-class performance on this test as generally :**

Outstanding       Excellent  
 Very good       Good  
 Above average       Average  
 Below average       Low  
 Other : \_\_\_\_\_

<b>MAJOR AREAS OF CONCERN THAT NEED REMEDIAL INTERVENTION :</b>					<b>OTHER / MORE SPECIFIC AREAS :</b>
<b>Grammar</b>	<input type="checkbox"/> strongly agree	<input type="checkbox"/> agree	<input type="checkbox"/> partially agree	<input type="checkbox"/> don't agree	▪ ..... ▪ ..... ▪ ..... ▪ ..... ▪ .....
<b>Vocabulary</b>	<input type="checkbox"/> strongly agree	<input type="checkbox"/> agree	<input type="checkbox"/> partially agree	<input type="checkbox"/> don't agree	
<b>Functions</b>	<input type="checkbox"/> strongly agree	<input type="checkbox"/> agree	<input type="checkbox"/> partially agree	<input type="checkbox"/> don't agree	
<b>Composition</b>	<input type="checkbox"/> strongly agree	<input type="checkbox"/> agree	<input type="checkbox"/> partially agree	<input type="checkbox"/> don't agree	
<b>Mechanics</b>	<input type="checkbox"/> strongly agree	<input type="checkbox"/> agree	<input type="checkbox"/> partially agree	<input type="checkbox"/> don't agree	
<b>Comprehension</b>	<input type="checkbox"/> strongly agree	<input type="checkbox"/> agree	<input type="checkbox"/> partially agree	<input type="checkbox"/> don't agree	

## PLANS & STRATEGIES FOR REMEDIAL INTERVENTION

Based on my observations, analysis, and evaluation of the outcome and the data collected from this diagnostic test, I plan to

Signed : ..... / ..... / .....

تقرير موجز حول تمرير رائز التقويم التشخيصي في مادة الإنجليزية :

..... / ..... / .....

ملاحظات و توقيع السيد الناظر أو رئيس المؤسسة :

ملاحظات و توقيع السيد الحارس العام :

..... / ..... / .....

..... / ..... / .....

Inspector's Comments :

..... / ..... / .....

LEVEL :

- Common Core  
  First Baccalaureate  
  Second Baccalaureate  
  Other : \_\_\_\_\_

CLASS : _____		Activity / Content & Material Covered :	Time /Date :	Observations / Comments :
MONTH: <input type="checkbox"/> Sept <input type="checkbox"/> Oct WEEK : 1 2 3 4	SESSION :	1	_____ __ / __ / __	
		2	_____ __ / __ / __	
		3	_____ __ / __ / __	
		4	_____ __ / __ / __	
MONTH: <input type="checkbox"/> Sept <input type="checkbox"/> Oct WEEK : 1 2 3 4	SESSION :	1	_____ __ / __ / __	
		2	_____ __ / __ / __	
		3	_____ __ / __ / __	
		4	_____ __ / __ / __	
MONTH: <input type="checkbox"/> Sept <input type="checkbox"/> Oct WEEK : 1 2 3 4	SESSION :	1	_____ __ / __ / __	
		2	_____ __ / __ / __	
		3	_____ __ / __ / __	
		4	_____ __ / __ / __	
MONTH: <input type="checkbox"/> Sept <input type="checkbox"/> Oct WEEK : 1 2 3 4	SESSION :	1	_____ __ / __ / __	
		2	_____ __ / __ / __	
		3	_____ __ / __ / __	
		4	_____ __ / __ / __	
MONTH: <input type="checkbox"/> Sept <input type="checkbox"/> Oct WEEK : 1 2 3 4	SESSION :	1	_____ __ / __ / __	
		2	_____ __ / __ / __	
		3	_____ __ / __ / __	
		4	_____ __ / __ / __	

