



Library Systems

Instructor Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Department/Course/Section: \_\_\_\_\_

Semester/Year: \_\_\_\_\_

Email address: \_\_\_\_\_

Please circle the Test Type and Test Number:

Test	Quiz		Exam		Midterm		Final		
1	2	3	4	5	6	7	8	9	10

Please circle test Version Number:

1	2	3	4	5	6	7	8	9	10
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**Special Information: Unless otherwise indicated, items in (parenthesis) are the default selections we will use**

- Are all the questions on all the forms worth the same number of points? (Yes) No
- How many points each? (1.0) \_\_\_\_\_
- Is there a subjective part to the test? Yes (No)
- Does your answer key have multiple marks for responses? Yes (No)
- If your answer key does have multiple marks how will they be graded as? And (Or)
- And – ALL marks must be correct Or – Any single mark is correct

Report Instructions:

- How would you like the Respondent Statistics (basic report of tests submitted) report to be sorted? (Circle all versions you wish to receive) (Student Name) Student ID Grade
- Would you like the Respondent Statistics report with the student name? (Yes) No
- If you circle no, how would you like the above sorted? (Student ID) Grade
- Break them down as individual student Grade Reports? (Yes) No
- Print incorrect responses on the student Grade Reports? (Yes) No  
(Incorrect responses are shown with correct response from key)

Please circle any additional reports wanted:

	(Item Statistics)	(Item Analysis)	(Test Statistics)	(Frequency Distribution)
File Format:	(.pdf)	.rtf	.asc	.xls

Any other Special Key or Printing Instructions: \_\_\_\_\_

Test results received by: \_\_\_\_\_ Date/Time: \_\_\_\_\_

Grader: \_\_\_\_\_ Date/Time completed: \_\_\_\_\_

Person Contacted for Test pick up: \_\_\_\_\_ Time/Date: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_