

A

Student Name _____

School Name _____

District/LEA Name _____

PRACTICE TEST Algebra I

Answer Document

B

Last Name										First Name										MI
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A
B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B
C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C
D	D	D	D	D	D	D	D	D	D	D	D	D	D	D	D	D	D	D	D	D
E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E
F	F	F	F	F	F	F	F	F	F	F	F	F	F	F	F	F	F	F	F	F
G	G	G	G	G	G	G	G	G	G	G	G	G	G	G	G	G	G	G	G	G
H	H	H	H	H	H	H	H	H	H	H	H	H	H	H	H	H	H	H	H	H
I	I	I	I	I	I	I	I	I	I	I	I	I	I	I	I	I	I	I	I	I
J	J	J	J	J	J	J	J	J	J	J	J	J	J	J	J	J	J	J	J	J
K	K	K	K	K	K	K	K	K	K	K	K	K	K	K	K	K	K	K	K	K
L	L	L	L	L	L	L	L	L	L	L	L	L	L	L	L	L	L	L	L	L
M	M	M	M	M	M	M	M	M	M	M	M	M	M	M	M	M	M	M	M	M
N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N
O	O	O	O	O	O	O	O	O	O	O	O	O	O	O	O	O	O	O	O	O
P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P
Q	Q	Q	Q	Q	Q	Q	Q	Q	Q	Q	Q	Q	Q	Q	Q	Q	Q	Q	Q	Q
R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R
S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S
T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T
U	U	U	U	U	U	U	U	U	U	U	U	U	U	U	U	U	U	U	U	U
V	V	V	V	V	V	V	V	V	V	V	V	V	V	V	V	V	V	V	V	V
W	W	W	W	W	W	W	W	W	W	W	W	W	W	W	W	W	W	W	W	W
X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Z	Z	Z	Z	Z	Z	Z	Z	Z	Z	Z	Z	Z	Z	Z	Z	Z	Z	Z	Z	Z

C

Place the Student ID Label Here

D Gender

Female Male

E Date of Birth

Day	Month	Year
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
1	<input type="radio"/>	0
2	<input type="radio"/>	1
3	<input type="radio"/>	2
4	<input type="radio"/>	3
5	<input type="radio"/>	4
6	<input type="radio"/>	5
7	<input type="radio"/>	6
8	<input type="radio"/>	7
9	<input type="radio"/>	8
<input type="radio"/>	<input type="radio"/>	9
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

School Use Only

F State Student Identifier

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
A	A	A	A	A	A	A	A	A	A
B	B	B	B	B	B	B	B	B	B
C	C	C	C	C	C	C	C	C	C
D	D	D	D	D	D	D	D	D	D
E	E	E	E	E	E	E	E	E	E
F	F	F	F	F	F	F	F	F	F
G	G	G	G	G	G	G	G	G	G
H	H	H	H	H	H	H	H	H	H
I	I	I	I	I	I	I	I	I	I
J	J	J	J	J	J	J	J	J	J
K	K	K	K	K	K	K	K	K	K
L	L	L	L	L	L	L	L	L	L
M	M	M	M	M	M	M	M	M	M
N	N	N	N	N	N	N	N	N	N
O	O	O	O	O	O	O	O	O	O
P	P	P	P	P	P	P	P	P	P
Q	Q	Q	Q	Q	Q	Q	Q	Q	Q
R	R	R	R	R	R	R	R	R	R
S	S	S	S	S	S	S	S	S	S
T	T	T	T	T	T	T	T	T	T
U	U	U	U	U	U	U	U	U	U
V	V	V	V	V	V	V	V	V	V
W	W	W	W	W	W	W	W	W	W
X	X	X	X	X	X	X	X	X	X
Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Z	Z	Z	Z	Z	Z	Z	Z	Z	Z
0	0	0	0	0	0	0	0	0	0
1	1	1	1	1	1	1	1	1	1
2	2	2	2	2	2	2	2	2	2
3	3	3	3	3	3	3	3	3	3
4	4	4	4	4	4	4	4	4	4
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6	6	6	6	6	6	6	6	6	6
7	7	7	7	7	7	7	7	7	7
8	8	8	8	8	8	8	8	8	8
9	9	9	9	9	9	9	9	9	9



PLEASE DO NOT WRITE IN THIS AREA



SERIAL #



Unit 1 - Section 1 (Non-Calculator)

1. (A) (B) (C) (D) (E) (F) (G)

2. **Part A** (A) (B) (C) (D)
Part B (A) (B) (C) (D)

3. (A) (B) (C) (D)

4. (A) (B) (C) (D)

5. (A) (B) (C) (D) (E)

6. **Part A** (A) (B) (C) (D)
Part B (A) (B) (C) (D)

7. (A) (B) (C) (D)

8. (A) (B) (C) (D)

9. **Part A** (A) (B) (C) (D) (E) (F) (G) (H)
Part B (A) (B) (C) (D) (E) (F) (G) (H)





Unit 1 - Section 2 (Calculator)

Once you have received your calculator, continue into the calculator section.



GO ON TO NEXT PAGE



Unit 1

13. Part A

13. Part B

PLEASE DO NOT WRITE IN THIS AREA



SERIAL #



13. Part C

[Large empty rectangular box for student response]



Unit 1

14.

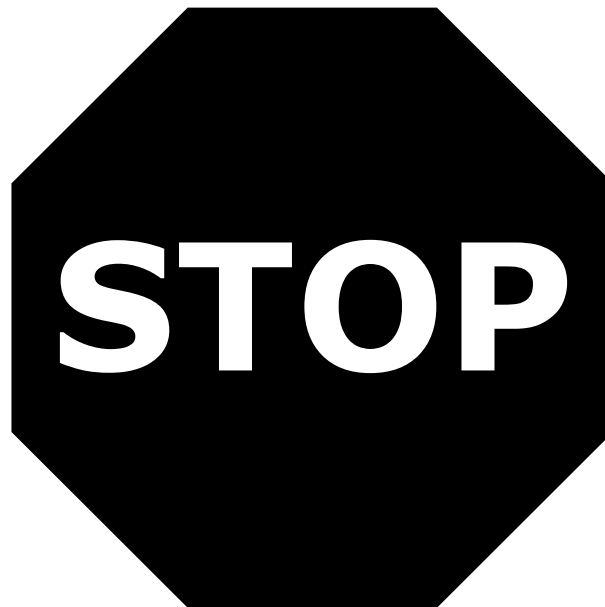
Large empty rectangular area for student work.



PLEASE DO NOT WRITE IN THIS AREA

Row of 25 circles for marking answers, with the first one containing a square.

SERIAL #



You have come to the end of the calculator section in Unit 1 of the test.

- **Review your answers in the calculator section of Unit 1 only.**
- **Then, close your test booklet and answer document and raise your hand to turn in your test materials.**





17.

[Large empty rectangular box for student response]



22. Part A

Large empty rectangular box for writing the answer to Part A.

22. Part B

Large empty rectangular box for writing the answer to Part B.

PLEASE DO NOT WRITE IN THIS AREA



SERIAL #



23. (A) (B) (C) (D) (E) (F)

24. Part A (A) (B) (C) (D)

Part B (A) (B) (C) (D) (E) (F)

25. (A) (B) (C) (D)

26. (A) (B) (C) (D)

27. Part A (A) (B) (C) (D) (E)



27. Part B

Large empty rectangular box for writing the answer to Part B.

27. Part C

Large empty rectangular box for writing the answer to Part C.

PLEASE DO NOT WRITE IN THIS AREA



SERIAL #



28. (A) (B) (C) (D) (E)

29. (A) (B) (C) (D)

30. Part A (A) (B) (C) (D)

Part B (A) (B) (C) (D)



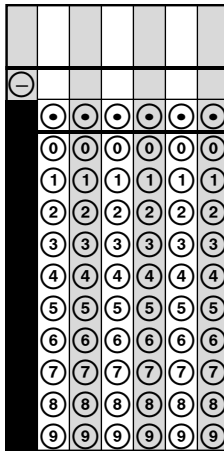


Unit 3 (Calculator)

31. (A) (B) (C) (D)

32. Part A (A) (B) (C) (D)

Part B



33. (A) (B) (C) (D)



35. (A) (B) (C) (D) (E) (F) (G) (H)

36. Part A

⊖					
⊙	⊙	⊙	⊙	⊙	⊙
0	0	0	0	0	0
1	1	1	1	1	1
2	2	2	2	2	2
3	3	3	3	3	3
4	4	4	4	4	4
5	5	5	5	5	5
6	6	6	6	6	6
7	7	7	7	7	7
8	8	8	8	8	8
9	9	9	9	9	9

Part B (A) (B) (C) (D) (E) (F)

37. (A) (B) (C) (D)



38. Part A

Blank area for Part A response.

38. Part B

Blank area for Part B response.

PLEASE DO NOT WRITE IN THIS AREA



SERIAL #



39.

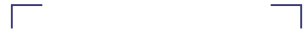
Blank area for student response.



You have come to the end of Unit 3 of the test.

- **Review your answers from Unit 3 only.**
- **Then, close your test booklet and answer document and raise your hand to turn in your test materials.**





Algebra I
Answer Document

Practice Test

ALGIFS