

A

Student Name _____

School Name _____

District/LEA Name _____

P

PRACTICE TEST
Grade 4
English Language Arts/Literacy
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

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
5	5	5	5	5	5	5	5	5	5
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

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	Jan	0
1	Feb	1
2	Mar	2
3	Apr	3
4	May	4
5	Jun	5
6	Jul	6
7	Aug	7
8	Sep	8
9	Oct	9
<input type="radio"/>	Nov	<input type="radio"/>
<input type="radio"/>	Dec	<input type="radio"/>

7.

7. Continued

Lined writing area with 20 horizontal lines for student response.

PLEASE DO NOT WRITE IN THIS AREA

Row of 25 bubbles for marking answers.

SERIAL #

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

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

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

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

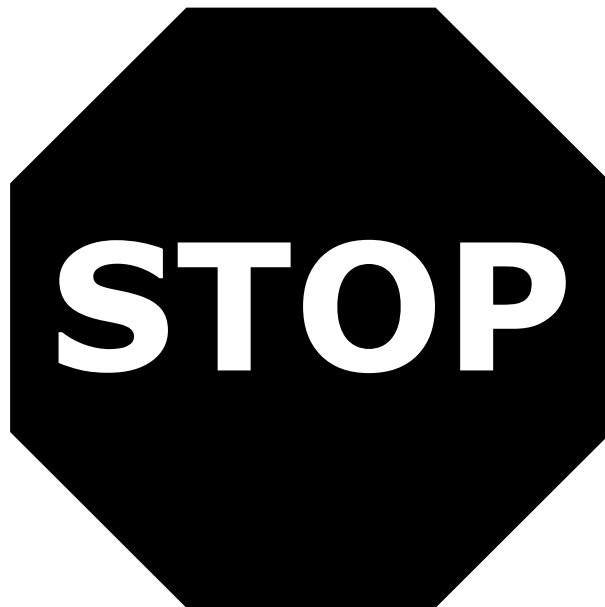
10. Part A (A) (B) (C) (D)

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

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

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





You have come to the end of Unit 1 of the test.

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



PLEASE DO NOT WRITE IN THIS AREA



SERIAL #

20.

Unit 2

CC



You have come to the end of Unit 2 of the test.

- **Review your answers from Unit 2 only.**
- **Then, close your test booklet and answer document and raise your hand to turn in your test materials.**





PLEASE DO NOT WRITE IN THIS AREA

SERIAL #



3

Grade 4
English Language Arts/Literacy
Answer Document

Practice Test

ELA04ABO