

Test Analysis Example 1

In this example, students are asked to rate their confidence level for each question during the test. Ideally, this is done after students have completed their tests and are reviewing their answers prior to turning in, thus encouraging the test taking strategy of review. Once it has been graded, tests are returned and students complete the next two columns to see patterns in mistakes.

Exam 1 Analysis

After you take your exam, please review your answers and mark your level of confidence for each question. When your exam is graded, you'll get this sheet back to examine your correct and incorrect answers as well as the reasons for any mistakes you may have made.

Question #	Rate your confidence level	Did you get it correct or incorrect?	If incorrect, what type of mistake did you make?
1	<input type="checkbox"/> Confident <input type="checkbox"/> Somewhat confident <input type="checkbox"/> Unsure/Guessing	<input type="checkbox"/> Correct <input type="checkbox"/> Incorrect	<input type="checkbox"/> Simple mistake <input type="checkbox"/> Don't understand the question or concept <input type="checkbox"/> I don't remember this being covered <input type="checkbox"/> Other _____
2	<input type="checkbox"/> Confident <input type="checkbox"/> Somewhat confident <input type="checkbox"/> Unsure/Guessing	<input type="checkbox"/> Correct <input type="checkbox"/> Incorrect	<input type="checkbox"/> Simple mistake <input type="checkbox"/> Don't understand the question or concept <input type="checkbox"/> I don't remember this being covered <input type="checkbox"/> Other _____
3	<input type="checkbox"/> Confident <input type="checkbox"/> Somewhat confident <input type="checkbox"/> Unsure/Guessing	<input type="checkbox"/> Correct <input type="checkbox"/> Incorrect	<input type="checkbox"/> Simple mistake <input type="checkbox"/> Don't understand the question or concept <input type="checkbox"/> I don't remember this being covered <input type="checkbox"/> Other _____
4	<input type="checkbox"/> Confident <input type="checkbox"/> Somewhat confident <input type="checkbox"/> Unsure/Guessing	<input type="checkbox"/> Correct <input type="checkbox"/> Incorrect	<input type="checkbox"/> Simple mistake <input type="checkbox"/> Don't understand the question or concept <input type="checkbox"/> I don't remember this being covered <input type="checkbox"/> Other _____
5	<input type="checkbox"/> Confident <input type="checkbox"/> Somewhat confident <input type="checkbox"/> Unsure/Guessing	<input type="checkbox"/> Correct <input type="checkbox"/> Incorrect	<input type="checkbox"/> Simple mistake <input type="checkbox"/> Don't understand the question or concept <input type="checkbox"/> I don't remember this being covered <input type="checkbox"/> Other _____
6	<input type="checkbox"/> Confident <input type="checkbox"/> Somewhat confident <input type="checkbox"/> Unsure/Guessing	<input type="checkbox"/> Correct <input type="checkbox"/> Incorrect	<input type="checkbox"/> Simple mistake <input type="checkbox"/> Don't understand the question or concept <input type="checkbox"/> I don't remember this being covered <input type="checkbox"/> Other _____

7	<input type="checkbox"/> Confident <input type="checkbox"/> Somewhat confident <input type="checkbox"/> Unsure/Guessing	<input type="checkbox"/> Correct <input type="checkbox"/> Incorrect	<input type="checkbox"/> Simple mistake <input type="checkbox"/> Don't understand the question or concept <input type="checkbox"/> I don't remember this being covered <input type="checkbox"/> Other _____
8	<input type="checkbox"/> Confident <input type="checkbox"/> Somewhat confident <input type="checkbox"/> Unsure/Guessing	<input type="checkbox"/> Correct <input type="checkbox"/> Incorrect	<input type="checkbox"/> Simple mistake <input type="checkbox"/> Don't understand the question or concept <input type="checkbox"/> I don't remember this being covered <input type="checkbox"/> Other _____
9	<input type="checkbox"/> Confident <input type="checkbox"/> Somewhat confident <input type="checkbox"/> Unsure/Guessing	<input type="checkbox"/> Correct <input type="checkbox"/> Incorrect	<input type="checkbox"/> Simple mistake <input type="checkbox"/> Don't understand the question or concept <input type="checkbox"/> I don't remember this being covered <input type="checkbox"/> Other _____
10	<input type="checkbox"/> Confident <input type="checkbox"/> Somewhat confident <input type="checkbox"/> Unsure/Guessing	<input type="checkbox"/> Correct <input type="checkbox"/> Incorrect	<input type="checkbox"/> Simple mistake <input type="checkbox"/> Don't understand the question or concept <input type="checkbox"/> I don't remember this being covered <input type="checkbox"/> Other _____