

NYSAA Data Collection Sheet for Documenting a Task by Time Segments

Student Name:	Content Area: <input type="checkbox"/> ELA <input type="checkbox"/> Mathematics <input type="checkbox"/> Science <input type="checkbox"/> Social Studies (HS only)
AGLI Text:	Assessment task:

ACCURACY (Acc) KEY: (+) Correct Response (-) Inaccurate/No Response **INDEPENDENCE (Ind) KEY: (+) Independent (-) Prompted**

Length of Time for each Segment <small>_____ sec./min. (circle one)</small>	Date															
	Acc +/-	Ind +/-														
Segment 1																
Segment 2																
Segment 3																
Segment 4																
Segment 5																
Total +'s																
Total Segments																
Fraction	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/
Percent (%)	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%
Staff Initials Recording Data for each Date from Key (Req'd)																

Staff Key (REQUIRED) Record the Initials and Corresponding Name of Staff Recording Data	1.) Initials: _____ Name: _____	2.) Initials: _____ Name: _____
	3.) Initials: _____ Name: _____	4.) Initials: _____ Name: _____

NOTE: A Data Collection Sheet cannot stand alone, supporting evidence is required. Complete in full, including staff initials for each date.