Name:

Date of ACT:

How many times have you taken this test before?

What was your impression of the test the first time you took it (easy, confusing, too long, difficult, etc.)? If you have not taken the test before, what is your overall impression of the test from people who have taken it?

Which category (math, reading, science, writing and language, or essay) do you feel most confident about? Which category do you feel least confident about?

Do you plan on attending a four-year college directly after high school?

What kind of calculator do you have? How long have you had it?

What is the highest level math class you have completed with a passing grade?

Do you plan to complete the optional essay portion of the test?