



NEW MEXICO ASSESSMENT
OF SCIENCE READINESS



NM-ASR

Documento De

Respuestas Para La

Prueba De Práctica

Grado 11

Escriba el nombre del estudiante





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Sesión 1

Ciencias



MARCA CORRECTA ●

MARCA INCORRECTA

1. Parte a <input type="radio"/> A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> D Parte b <input type="radio"/> A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> D	2. Parte a <input type="radio"/> A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> D Parte b <input type="radio"/> A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> D	3. Parte a <input type="radio"/> A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> D Parte b <input type="radio"/> A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> D
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SIGUE

Tu respuesta y trabajo deben caber dentro de este recuadro.

4.

A large rectangular box containing 20 horizontal blue lines for writing an answer.

<p>5. A B C D</p> <p>6. A B C D</p> <p>7. Parte a A B C D Parte b A B C D</p>	<p>8. Parte a A B C D Parte b A B C D</p> <p>9. A B C D</p>	<p>10. Parte a A B C D Parte b A B C D</p> <p>11. A B C D</p>	<p>12. Parte a A B C D Parte b A B C D</p>
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ÉSTE ES EL FINAL DE ESTA SESIÓN.
NO PASES A LA PRÓXIMA SESIÓN.





MARCA CORRECTA ●

MARCA INCORRECTA

13. Parte a A B C D

Parte b A B C D

14. Parte a A B C D

Parte b A B C D

15. Parte a A B C D

Parte b A B C D

SIGUE

Tu respuesta y trabajo deben caber dentro de este recuadro.

16. _____

SIGUE 

<p>17. (A) (B) (C) (D)</p> <p>18. (A) (B) (C) (D)</p> <p>19. Parte a (A) (B) (C) (D)</p> <p>Parte b (A) (B) (C) (D)</p>	<p>20. Parte a (A) (B) (C) (D)</p> <p>Parte b (A) (B) (C) (D)</p> <p>21. Parte a (A) (B) (C) (D)</p> <p>Parte b (A) (B) (C) (D)</p>	<p>22. (A) (B) (C) (D)</p> <p>23. Parte a (A) (B) (C) (D)</p> <p>Parte b (A) (B) (C) (D)</p> <p>24. (A) (B) (C) (D)</p>
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ÉSTE ES EL FINAL DE ESTA SESIÓN.
NO PASES A LA PRÓXIMA SESIÓN.





MARCA CORRECTA ●

MARCA INCORRECTA

25. Parte a A B C D

Parte b A B C D

26. Parte a A B C D

Parte b A B C D

27. Parte a A B C D

Parte b A B C D

28. Parte a A B C D

Parte b A B C D

Tu respuesta y trabajo deben caber dentro de este recuadro.

29. _____

SIGUE ➔

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

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

32. Parte a (A) (B) (C) (D)

Parte b (A) (B) (C) (D)

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

Parte b (A) (B) (C) (D)

34. (A) (B) (C) (D)

35. (A) (B) (C) (D)

36. Part a (A) (B) (C) (D)

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

37. Part a (A) (B) (C) (D) (E)

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

ÉSTE ES EL FINAL DE ESTA SESIÓN.

ALTO

**NO ESCRIBAS
EN ESTA
PÁGINA**

**NO ESCRIBAS
EN ESTA
PÁGINA**

**NO ESCRIBAS
EN ESTA
PÁGINA**

SECTION 1: TESTING: If student did not test all sessions, mark the appropriate Test Completion Status in Box **G**. Bubble accommodations used in Box **H** and Box **I**. Bubbling Box **J** will void the entire answer document.
Caution: Filling in the bubble in Box **J** will result in all of the answer document not being scored.

G TEST COMPLETION STATUS	
<i>(Mark one bubble for each content)</i>	
Withdrew Before Test Completion	①
Non-Allowed Modification	②
Medical Emergency	③
Parental Refusal	④
Other Non-Completion	⑤
Test Irregularities	⑥
Absent	⑦
COVID exemption	⑨

H IEP/504 ACCOMODATIONS	
Human Reader English	<input type="radio"/>
Human Reader Spanish	<input type="radio"/>
Read Aloud to Self	<input type="radio"/>
Human Signer	<input type="radio"/>
Selected Response Human Scribe	<input type="radio"/>
Constructed Response Human Scribe	<input type="radio"/>
Assistive Technology Devices Presentation	<input type="radio"/>
Assistive Technology Devices Responses	<input type="radio"/>
Allow Accessibility Mode Testing	<input type="radio"/>
Large-print	<input type="radio"/>
Braille	<input type="radio"/>

I EL ACCOMMODATIONS	
Spanish Language Version	<input type="radio"/>
Picture Dictionary	<input type="radio"/>
Directions in Native Language	<input type="radio"/>
Commercial Word-to-Word Dictionary	<input type="radio"/>
Customized Dual Language Glossary	<input type="radio"/>
Pocket Word-to-Word Translator	<input type="radio"/>

J VOID-DO NOT SCORE	
<input type="radio"/> Void this answer document	

For Internal Use Only					
A	①	②	③	④	⑤
B	⑥	⑦	⑧	⑨	⑩
C	⑪	⑫	⑬	⑭	⑮
D	⑯	⑰	⑱	⑲	⑳
E	㉑	㉒	㉓	㉔	㉕

SECTION 2: IDENTIFICATION: Bubble Boxes A–F if this student’s Pre-ID label is invalid. (See TAM section “Rules for Completing English PBT Biograds” for clarification.)

A																										B		C			
LAST NAME																										DISTRICT CODE		SCHOOL CODE			
A	A	A	A	A	A	A	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	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	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	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	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	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	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	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	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	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	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	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	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	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	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	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	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	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	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	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	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	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	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	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	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	Z	Z	Z	Z	Z	Z	Z				

D BIRTH DATE			
MONTH	DAY	YEAR	
JAN	<input type="radio"/>		
FEB	<input type="radio"/>		
MAR	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
APR	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
MAY	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
JUN	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
JUL	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
AUG	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SEP	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
OCT	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOV	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
DEC	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

E STATE STUDENT ID									
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

F GENDER	
<input type="radio"/> Male	<input type="radio"/> Female

NM-ASR
Practice Test
Grade
11

PLACE LABEL HERE

