P

Do NOT Affix Student ID Label Here

A

Student Name _____

School Name _____

LEA Number _____

MCAP

Maryland Comprehensive Assessment Program

PRACTICE TEST

Grade 6

Mathematics

Answer Document

School Use Only

F SASID

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

B

Last Name											First Name											MI
○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○
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
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
E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E
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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
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
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
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
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
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
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
V	V	V	V	V	V	V	V	V	V	V	V	V	V	V	V	V	V	V	V	V	V	V
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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

C

Place the Student ID Label Here

D Gender

○ Female ○ Male ○ Non-Binary

E Date of Birth

Day		Month	Year			
0	0	○ Jan		0	0	0
1	1	○ Feb	1		1	1
2	2	○ Mar	2		2	2
3	3	○ Apr			3	3
	4	○ May			4	4
	5	○ Jun			5	5
	6	○ Jul			6	6
	7	○ Aug			7	7
	8	○ Sep			8	8
	9	○ Oct		9	9	9
		○ Nov				
		○ Dec				

CC

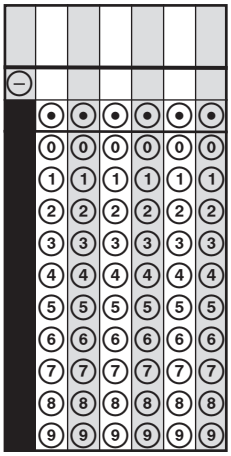
PLEASE DO NOT WRITE IN THIS AREA

SERIAL #

Section 1
(Non-Calculator)

1. Ⓐ Ⓑ Ⓒ Ⓓ

2.



3. Ⓐ Ⓑ Ⓒ Ⓓ

4. Ⓐ Ⓑ Ⓒ Ⓓ

5. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ

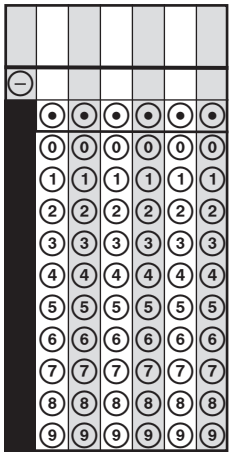
6. Ⓐ Ⓑ Ⓒ Ⓓ

7. Ⓐ Ⓑ Ⓒ Ⓓ

8. Ⓐ Ⓑ Ⓒ Ⓓ

GO ON ▶

9.



10. Ⓐ Ⓑ Ⓒ Ⓓ

11. Ⓐ Ⓑ Ⓒ Ⓓ

12. Ⓐ Ⓑ Ⓒ Ⓓ

13. Ⓐ Ⓑ Ⓒ Ⓓ

STOP

PLEASE DO NOT WRITE IN THIS AREA

SERIAL #

You have come to the end of Section 1 of the test. Review your answers from Section 1 only.

Section 2
(Calculator)

1. Ⓐ Ⓑ Ⓒ Ⓓ

2. Ⓐ Ⓑ Ⓒ Ⓓ

3. Ⓐ Ⓑ Ⓒ Ⓓ

4. Ⓐ Ⓑ Ⓒ Ⓓ

GO ON ▶

PLEASE DO NOT WRITE IN THIS AREA

SERIAL #

5.

GO ON ▶

6. Ⓐ Ⓑ Ⓒ Ⓓ

7. Ⓐ Ⓑ Ⓒ Ⓓ

8. Ⓐ Ⓑ Ⓒ Ⓓ

STOP

PLEASE DO NOT WRITE IN THIS AREA

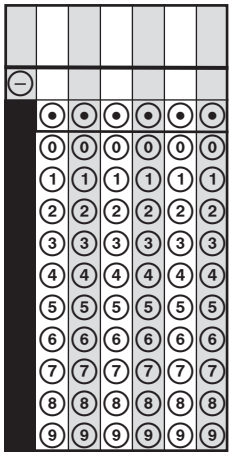
SERIAL #

You have come to the end of Section 2 of the test. Review your answers from Section 2 only.

Section 3
(Calculator)

1. Ⓐ Ⓑ Ⓒ Ⓓ

2.



GO ON ▶

PLEASE DO NOT WRITE IN THIS AREA

SERIAL #

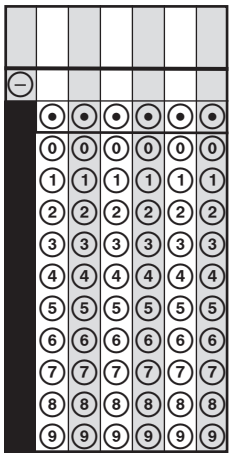
3.

GO ON ▶

PLEASE DO NOT WRITE IN THIS AREA

SERIAL #

4.



5.

GO ON ▶

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SERIAL #

6. Ⓐ Ⓑ Ⓒ Ⓓ

7. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ Ⓕ

STOP

You have come to the end of Section 3 of the test. Review your answers from Section 3 only.

STOP

PLEASE DO NOT WRITE IN THIS AREA

SERIAL #

Section 4
(Calculator)

1. Ⓐ Ⓑ Ⓒ Ⓓ

2. Ⓐ Ⓑ Ⓒ Ⓓ

3. Ⓐ Ⓑ Ⓒ Ⓓ

GO ON ▶

4.

GO ON ▶

PLEASE DO NOT WRITE IN THIS AREA

SERIAL #

5. Ⓐ Ⓑ Ⓒ Ⓓ

6. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ

7. Ⓐ Ⓑ Ⓒ Ⓓ

STOP

You have come to the end of Section 4 of the test. Review your answers from Section 4 only.

STOP

PLEASE DO NOT WRITE IN THIS AREA

SERIAL #

P

MCAP

Maryland Comprehensive Assessment Program

Grade 6
Mathematics
Answer Document

Practice Test

Maryland
STATE DEPARTMENT OF EDUCATION

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