

# Grade 9 EQAO Recording Sheet – Session 1

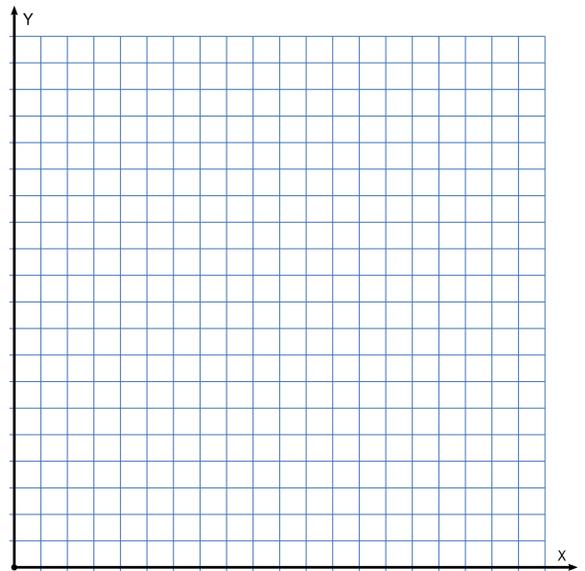
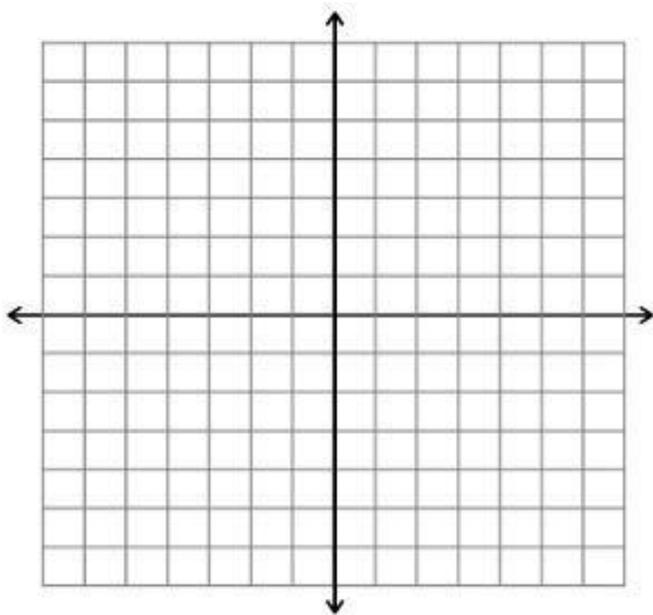
Name: \_\_\_\_\_

Use the blank spaces to help record your thinking as you are completing the EQAO assessment.

Submit your work to your teacher when you are done.

|                     |    |                     |
|---------------------|----|---------------------|
| <b>Stage 1</b><br>1 | 2  | 3                   |
| 4                   | 5  | 6                   |
| 7                   | 8  | 9                   |
| 10                  | 11 | 12                  |
| 13                  | 14 | <b>Stage 2</b><br>1 |

|    |    |    |
|----|----|----|
| 2  | 3  | 4  |
| 5  | 6  | 7  |
| 8  | 9  | 10 |
| 11 | 12 | 13 |



# Grade 9 EQAO Recording Sheet – Session 2

Name: \_\_\_\_\_

Use the blank spaces to help record your thinking as you are completing the EQAO assessment.

Submit your work to your teacher when you are done.

|                     |    |                     |
|---------------------|----|---------------------|
| <b>Stage 1</b><br>1 | 2  | 3                   |
| 4                   | 5  | 6                   |
| 7                   | 8  | 9                   |
| 10                  | 11 | 12                  |
| 13                  | 14 | <b>Stage 1</b><br>1 |

|    |    |    |
|----|----|----|
| 2  | 3  | 4  |
| 5  | 6  | 7  |
| 8  | 9  | 10 |
| 11 | 12 | 13 |

