

BOSTON PUBLIC SCHOOLS

REQUEST FORM FOR TERRANOVA (AWC) TESTING WITH ACCOMMODATIONS OCTOBER 20, 2018 TEST ADMINISTRATION

School _____

Student Name _____ DOB ____/____/____

Current Grade Level (circle one) 3 4 5

Parent Name: _____ Parent Contact Number: _____

Parent Signature: _____

Testing Accommodations for students with learning and/or physical disabilities: The student currently receives and utilizes each of the approved accommodations during school –based standardized testing. Test accommodation requests for students with disabilities must include a copy of the students' IEP or 504 Plans. Please check all that apply.

- | | | |
|-------------------------------------------------|----------------------------------------------------|-----------------------------------------------|
| <input type="checkbox"/> Extended Time | <input type="checkbox"/> Calculator | <input type="checkbox"/> Small groups |
| <input type="checkbox"/> Medical/Health concern | <input type="checkbox"/> Administrator reads aloud | <input type="checkbox"/> Large Print/Braille |
| <input type="checkbox"/> Circle in test booklet | <input type="checkbox"/> Student reads aloud | <input type="checkbox"/> Math reference sheet |

Testing Accommodations for English Learner (EL) students, please check the box below if you are requesting that the student receive EL test accommodations. To determine eligibility for EL accommodations, students are required to take an English Proficiency Test. Parents will be contacted with further information.

- EL Accommodations: Word-to-Word Bilingual Dictionary & Extended Time

Please forward this request form along with supporting documentation (IEP or 504 Plan) to AWC Testing/Non-BPS Students, Boston Public Schools, Office of Data and Accountability, 2300 Washington Street, Roxbury, MA 02119 by September 28, 2018.