

Accommodations: ACCESS for ELLs Paper



Completed by: _____

Date: _____

Student: _____

ID number: _____

District/School: _____

Grade: _____

Team Members: _____

Accommodations:

1. Braille (BR). *Grades 1-12; order materials in advance.*

Listening

Speaking *(not applicable)*

Reading

Writing

2. Extended Speaking test response time (ES)

Listening *(not applicable)*

Speaking

Reading *(not applicable)*

Writing *(not applicable)*

3. Extended testing of a test domain over multiple days (EM). *Provide written request and evidence of need to state education agency.*

Listening

Speaking

Reading

Writing

4. In-person human reader (IR). *Read item text, graphics labels, and answer choices exactly as they appear.*

Listening

Speaking

Reading *(not applicable)*

Writing

5. Repeat in-person human reader (RP). *Read item text, graphics labels, and answer choices exactly as they appear and repeat once at student request.*

Listening

Speaking

Reading *(not applicable)*

Writing

6. Interpreter signs directions in ASL (SD). *Sign administration instructions, test directions, and practice items. Do not sign scored items.*

Listening

Speaking

Reading

Writing

7. Large print (LP). *Order materials in advance.*

Listening

Speaking

Reading

Writing

(continued)

Student: _____

8. Manual control of item audio (MC)

| | | | |
|-----------|--------------------------|----------|--------------------------|
| Listening | <input type="checkbox"/> | Speaking | <input type="checkbox"/> |
| Reading | <i>(not applicable)</i> | Writing | <input type="checkbox"/> |

9. Repeat item audio (RA)

| | | | |
|-----------|--------------------------|----------|--------------------------|
| Listening | <input type="checkbox"/> | Speaking | <input type="checkbox"/> |
| Reading | <i>(not applicable)</i> | Writing | <input type="checkbox"/> |

10. Scribe (SR). *A trained adult records student responses during testing.*

| | | | |
|-----------|--------------------------|----------|--------------------------|
| Listening | <input type="checkbox"/> | Speaking | <i>(not applicable)</i> |
| Reading | <input type="checkbox"/> | Writing | <input type="checkbox"/> |

11. Recording device and transcription (RD). *Clear device after transcription.*

| | | | |
|-----------|-------------------------|----------|--------------------------|
| Listening | <i>(not applicable)</i> | Speaking | <i>(not applicable)</i> |
| Reading | <i>(not applicable)</i> | Writing | <input type="checkbox"/> |

12. Test administered in a non-school setting (NS). *Provide written request and evidence of need to state education agency.*

| | | | |
|-----------|--------------------------|----------|--------------------------|
| Listening | <input type="checkbox"/> | Speaking | <input type="checkbox"/> |
| Reading | <input type="checkbox"/> | Writing | <input type="checkbox"/> |

13. Word processor or similar keyboarding device (WD). *Clear device after verbatim transcription.*

| | | | |
|-----------|--------------------------|----------|--------------------------|
| Listening | <input type="checkbox"/> | Speaking | <i>(not applicable)</i> |
| Reading | <input type="checkbox"/> | Writing | <input type="checkbox"/> |