Accommodations: WIDA Alternate ACCESS



Completed by:				Date:	
Student: District/School:				ID number:	
			Grade:	Grade:	
Team Mer	nbers:				
Accommo	dations:				
1.		testing of a test don f need to state education		ys (EM). Provide written request and	
	Listening		Speaking		
	Reading		Writing		
2.	Interpreter signs directions in ASL (SD). Sign administration instructions, test directions, and practice items. Do not sign scored items.				
	Listening		Speaking		
	Reading		Writing		
3.	Scribe (SR). A trained adult records student responses during testing.				
	Listening		Speaking	(not applicable)	
	Reading		Writing		
4.	Recording	g device and transcri	ption (RD). Clear devic	e after transcription.	
	Listening	(not applicable)	Speaking	(not applicable)	
	Reading	(not applicable)	Writing		
5.	Test administered in a non-school setting (NS). <i>Provide written request and evidence of need to state education agency.</i>				
	Listening		Speaking		
	Reading		Writing		
6.	Word processor or similar keyboarding device (WD). Clear device after verbatim transcription.				
	Listening		Speaking	(not applicable)	
	Reading		Writing		