

Test Monitor Checklist 2011

Sample – This form is subject to change.

Name of Monitor: _____ **Exam(s) Monitored:** _____
District Monitored: _____ **Date:** _____
School Monitored: _____ **LEA Number:** _____

TEST COORDINATOR QUESTIONS (Ask Test Coordinator for the school or district – this is an interview)

1. Full name: _____
2. Currently licensed by ADE as teacher or administrator? Yes No
3. Who attended the required Test Coordinator Training from your school district?

Full name(s): _____

4. Who trained the building test administrators in your school?

Full name(s): _____

Where and when was the training?
(Location and Date) _____

5. Have you reviewed your district policy regarding cell phones? Yes No
 Have test administrators been informed about this policy?" Yes No

6. **Ask to view and verify the following:**

- | | | |
|------------------------------|------------------------------|-----------------------------|
| Test Security Guidelines | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Allowable Accommodations | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Test administration schedule | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Dated Sign-In Sheets | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Training presentation | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

7. **Ask to see where the test booklets are secured before and after testing.**

- Are they in a secure location? Yes No
- Is there a documented check-in/out procedure? Yes No
- Is the count verified at check-in/out and documented on the Test Booklet Security Form Yes No

Describe the daily procedure for testing (distribution, collection, count, and verification of all **Test Administration materials including reference sheets**).

8. How do you plan to make up tests? When and where?

9. **Are any students testing with accommodations?** Special Ed 504, or LEP students If yes:
 1. For students receiving accommodations, ask to see the “Consideration of Special Factors” page from the IEP, the “LEP Accommodation Form for LPAC” or the 504 accommodations page. 2. Ask to see approval forms for students receiving special accommodations which require ADE approval. 3. Ask to see the schedule of accommodated sessions, test administrators, and rooms. 4. Observe at least one accommodated session. (Use Test Administrator Questions Accommodated Session during observation.)

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TEST ADMINISTRATOR QUESTIONS (ONE)

1. Full name: _____
2. Are you currently licensed by ADE as a teacher/administrator? Yes No
3. What is your field of certification? _____
4. Who trained you? _____
5. Where and when was the training? _____

ANSWER THE QUESTIONS BELOW BY OBSERVATION

- Yes No Was the test administered as scheduled?
- Yes No Were the tests distributed in a spiraled order?
- Yes No Were the directions read properly?
(Teachers are to read test directions only. A teacher may not read the test questions unless providing an approved accommodation, nor should the teacher provide cues or help with questions.)
- Yes No Was the test administrator watchful and attentive?
- Yes No Did the administrator (or a monitor) walk quietly around the room during testing?
- Yes No Did the administrator (or a monitor) check to see if students were on the correct page using the session number or letter at the top left corner of each page of the answer document as a reference.
- Yes No Were test security guidelines followed?
(Tests were not left unsecured; students had no scratch paper, books, or cell phones.)
- Yes No Were visual clues in the room covered or removed? (Problems on chalk or bulletin boards, posters, etc.)

CALCULATORS (May only be used on EOC Algebra and Geometry. Calculators are **NOT** allowed on EOC Biology)

- Yes No Were calculators cleared **before and after** testing?
- Yes No **If a student brought a calculator from home; did the test administrator check to see if it met the guidelines for approved calculators?**

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TEST ADMINISTRATOR QUESTIONS (TWO)

1. Full name: _____
2. Are you currently licensed by ADE as a teacher/administrator? Yes No
3. What is your field of certification? _____
4. Who trained you? _____
5. Where and when was the training? _____

ANSWER THE QUESTIONS BELOW BY OBSERVATION

- Yes No Was the test administered as scheduled?
- Yes No Were the tests distributed in a spiraled order?
- Yes No Were the directions read properly?
(Teachers are to read test directions only. A teacher may not read the test questions unless providing an approved accommodation, nor should the teacher provide cues or help with questions.)
- Yes No Was the test administrator watchful and attentive?
- Yes No Did the administrator (or a monitor) walk quietly around the room during testing?
- Yes No Did the administrator (or a monitor) check to see if students were on the correct page using the session number or letter at the top left corner of each page of the answer document as a reference.
- Yes No Were test security guidelines followed?
(Tests were not left unsecured; students had no scratch paper, books, or cell phones.)
- Yes No Were visual clues in the room covered or removed? (Problems on chalk or bulletin boards, posters, etc.)

CALCULATORS (May only be used on EOC Algebra and Geometry. Calculators are **NOT** allowed on EOC Biology)

- Yes No Were calculators cleared **before and after** testing?
- Yes No **If a student brought a calculator from home; did the test administrator check to see if it met the guidelines for approved calculators?**

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TEST ADMINISTRATOR QUESTIONS ACCOMMODATED SESSION

1. Full name: _____
2. Are you currently licensed by ADE as a teacher/administrator? Yes No
3. What is your field of certification? _____
4. Who trained you and when was the training? _____
5. What accommodation(s) are you administering? _____
6. Is/are the accommodation(s) listed in the student's IEP, 504, or LPAC plan? Yes No
7. Have you had any training or instructions before providing the accommodation(s)? Explain.

ANSWER THE QUESTIONS BELOW BY OBSERVATION

- Yes No Is certified staff administering the accommodation(s) correctly? State approved accommodations (504, IEP, LPAC), and special accommodations
- Yes No Verify that the read test aloud accommodation only used for writing, math and science.
- Yes No Is the test administered as scheduled?
- Yes No Were the tests distributed in a spiraled order?
- Yes No Is the testing done in an appropriate setting?
- Yes No Does the teacher ensure he/she does not provide cues or help with questions?
- Yes No Is the test administrator watchful and attentive?
- Yes No Did the administrator (or a monitor) walk quietly around the room during testing?
- Yes No Did the administrator (or a monitor) check to see if students were on the correct page using the session number or letter at the top left corner of each page of the answer document as a reference.
- Yes No Were test security guidelines followed? (Tests were not left unsecured; students had no scratch paper, books, or cell phones.)
- Yes No Were visual clues in the room covered or removed? (Problems on chalk or bulletin boards, posters, etc.)

Note any concerns about the administration of the accommodated session:

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***IN ANY CASE OF TESTING IRREGULARITY OR EMERGENCY
WHILE MONITORING CONTACT:
DR. GAYLE POTTER AT 501-682-4558.***

SCHOOL NAME : _____ DISTRICT NAME: _____

LIST BELOW ANY CONCERNS, SUGGESTIONS, AND RECOMMENDATIONS:

Monitor Signature: _____

Date of Monitor Visit: _____

**PLEASE RETURN THIS FORM NO LATER THAN
ONE WEEK AFTER YOUR MONITORING VISIT TO:**