

**Unique Accommodation Request Form**

**Instructions:** If a student with a disability or an English learner requires an accommodation (i.e., a “unique accommodation”) that is **not listed as an option on IEP, IAP or ELL form, and does not change the construct being measured by the test**, the school may request approval for use of the accommodation using this request form. If approved, the accommodation must be listed in the Individualized Education Program (IEP) or 504 plan for a student with a disability; and an English Language Learner (ELL) plan, for an English learner.

To request approval for a unique accommodation, this form must be completed and submitted to [assessment@la.gov](mailto:assessment@la.gov) **at least four weeks prior** to testing to ensure a timely state response is received. A copy of this form must be kept in the student’s IEP folder and, if appropriate, retained at the district office.

Contact information for educator requesting unique accommodation(s) on behalf of the student			
Name:		Date:	
School Name:		Phone Number:	
District/LEA Name:		Email:	
Student Information			
First Letter of Student’s first Name:			
First Three Letters of the Student’s Last Name:			
Day of Birth:	Grade:	Louisiana Secure ID:	
Assessment Administration Information			
Unique Accommodation for:	<input type="checkbox"/> LEAP	<input type="checkbox"/> EOC	<input type="checkbox"/> Other-Specify:
Brief Description of the Requested Accommodation: <i>(e.g., paper EOC test)</i>			
Evidence to Support the Need <i>(include how it is used by the student in the classroom and on other assessments):</i>			
Describe Planning Needed <i>(e.g., school staff, space, and/or specialized tools or equipment):</i>			
<p>In submitting this form to LDOE for approval, the designee assures the following:</p> <ul style="list-style-type: none"> <li>• This accommodation is documented in the student’s: <input type="checkbox"/> IEP <input type="checkbox"/> IAP <input type="checkbox"/> LEP</li> <li>• The school team has met and considered all listed accommodations before proposing this unique accommodation.</li> <li>• The proposed accommodation is used, as appropriate, for routine class instruction and assessments.</li> </ul>			
Approval/Denial of Request: LDOE Use Only			
<input type="checkbox"/> This request has been approved			
<input type="checkbox"/> This request has been denied for the following reason: _____			
_____			
LDOE Staff Name and Position: _____			
LDOE Staff Signature: _____ Date: _____			