

Local Educational Agency (LEA):

Student Information				
Last Name:	First Name:	10 Digit LASID#:	DOB:	Grade:
School:	EL Teacher:	First/Native Language:		

Statewide Assessment and Subject(s) to be Administered
LEAP 2025: <input type="checkbox"/> ELA <input type="checkbox"/> Math <input type="checkbox"/> Social Studies <input type="checkbox"/> Science
LEAP 2025/EOC: <input type="checkbox"/> Eng I <input type="checkbox"/> Eng II <input type="checkbox"/> Eng III <input type="checkbox"/> Alg I <input type="checkbox"/> Geometry <input type="checkbox"/> Biology <input type="checkbox"/> US History

Directions
<ol style="list-style-type: none"> <li>To be completed by ELL Committee (please refer to the <a href="#">LEAP 2025 Accommodation and Accessibility Manual</a> for guidance)</li> <li>Testing accommodations are only allowed on statewide assessments if used routinely in the classroom</li> <li>Accommodations should be coded in the EL Test Accommodation field for statewide assessments</li> <li>Accommodations will be communicated to all teachers for classroom implementation</li> <li>Submit completed form to the School and District Test Coordinators</li> </ol>

Accommodations and Modifications for Instruction and Assessments for both Classroom & Statewide Assessments		
Classroom Accommodations and Modifications	Statewide Testing Accommodations and Modifications	
<input type="checkbox"/> Bilingual dictionary/electronic translator allowed at all times	<input type="checkbox"/> Audio textbooks/novels	<input type="checkbox"/> Math assessment in Spanish
<input type="checkbox"/> Compositions and written assignments accepted in native language	<input type="checkbox"/> Provision of English/Native Language Word-to-Word Dictionary	<input type="checkbox"/> Extended time
<input type="checkbox"/> Cooperative learning/peer assistance	<input type="checkbox"/> Reduced paper/pencil tasks	<input type="checkbox"/> Directions in native language
<input type="checkbox"/> Extended time for tests and assignments	<input type="checkbox"/> Repeated directions	<input type="checkbox"/> Provision of word-to-word dictionary (no definitions)
<input type="checkbox"/> Increased hands-on activities	<input type="checkbox"/> Shortened, modified, fewer, or taped assignments	<input type="checkbox"/> Test administered by EL teacher or individual providing language services
<input type="checkbox"/> Modified/shortened tests	<input type="checkbox"/> Directions in native language	<input type="checkbox"/> Tests read aloud on Math, Science, and Social Studies
<input type="checkbox"/> Peer assistance for note taking	<input type="checkbox"/> Native language reading material sometimes allowed	<input type="checkbox"/> None
<input type="checkbox"/> Photocopied notes/study guide	<input type="checkbox"/> Math assessment in Spanish	
<input type="checkbox"/> Spelling deductions discounted	<input type="checkbox"/> Tests read aloud on Math, Science, and Social Studies	

Accessibility Features Available to All Students				
<input type="checkbox"/> Individual Testing	<input type="checkbox"/> Small Group Testing	<input type="checkbox"/> Math Read Aloud	<input type="checkbox"/> Read Aloud to Self	<input type="checkbox"/> Specialized Furniture/Equipment

Unique Accommodation
<p>If the student requires an accommodation <i>that is not listed as an option above</i> and does not change the construct being measured by a test, and has a current IEP or IAP, the school may request approval for the use of the accommodation on statewide testing by submitting the <a href="#">Unique Accommodation Request Form</a>.</p> <p><input type="checkbox"/> The student has a documented unique accommodation used only in the classroom.</p> <p><input type="checkbox"/> The unique accommodation is approved by LDOE for state testing and is routinely used in the classroom.</p> <p><input type="checkbox"/> The Unique Accommodation Request is attached.</p>

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<b>School:</b>	<b>EL Teacher:</b>	<b>First/Native Language:</b>		

Signatures	
Teacher Signature:	Date:
Teacher Signature:	Date:
Teacher Signature:	Date:
Teacher Signature:	Date:
Principal/Designee Signature:	Date:
EL Staff Signature:	Date:
Parent/Guardian Signature(optional):	Date: