

Test Security Staff Assurance Report — Post Testing ELPA Screener

Washington Comprehensive Assessment Program (WCAP)

This form is to be completed at the end of testing by all staff who have responsibility in the administration of state assessments or access to secure testing materials. All "NO" responses must be explained below and reported to your School Test Coordinator (SC). Submit the completed form with signature to your SC at conclusion of testing.

Immediately alert your SC of any testing incident or security breach. The SC must consult with the District Assessment Coordinator as soon as an incident is discovered, or suspected, for guidance regarding investigation and possible score invalidations.

Use the space below to note incidents, if any.

☐ Attachments (submit any additional sheets and/or documentation with this report)

Yes No NA *

- | | | | |
|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Did you follow your school's Test Security and Building Plan (TSBP) "chain of custody" for all assessment materials? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Did you always keep secure assessment materials in a locked, limited-access storage area? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Did all testing occur during your school's district approved testing schedule? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Were students provided access to tools, supports, and accommodations, as documented? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Were materials that might help students answer assessment questions covered or removed from the testing environment, as described in the TAM? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | If assistive technologies were used, were student responses transcribed into a standard form test booklet or the Data Entry Interface (DEI), and was secure information deleted from computer/network? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Did you check out and check in test materials to students, account for and return all secure materials to your SC as described in your school's TSBP? This includes all ancillary papers (i.e., scratch and graph paper, glossaries, and test tickets) distributed during the testing sessions. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Have you reported all test or security improprieties, appeals, and incidents to your SC? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Have you submitted signed/annotated Roster to the SC, if applicable? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Have all secure assessment materials been returned to your SC? This includes ancillary papers, test tickets, test/answer booklets, Braille and large print booklets, WCAS secure paper/pencil script, and ELA listening transcript. |

*Not applicable (NA)

I have read and understand the non-disclosure restrictions that apply to secure assessment materials, as described in this document. I did not read, reveal, or disclose information about secure test content and I did not engage in activities that would violate the security of the state assessments or cause student achievement to be inaccurately represented or reported. I state that the above information is true and correct to the best of my ability.

Staff member name (please print)

Signature

Date

Submit both pages of this original form (completed/two signatures) to the SC for retention. Retain a copy for your records. A copy of this form should be retained at school or district and available for audit according to district retention policy.