School Site Security Report

School/Site Name: _____

Date:

Administration:

- □ Smarter Balanced/WCAS
- □ WIDA Assessments
- □ WA-AIM

This report must be completed by School Test Coordinator (SC). Refer to the *Professional Assessment Standards, Security, Appeals, and Reporting Guidelines* for additional information.

When completing this report:

- All No responses must be explained in the Note Exceptions and Local Action Taken section below.
- The **Not Applicable** box is used when a situation does not apply to the administration and no further information is necessary.
- Supporting documentation for this report should be included when reporting.
- Submit the completed report to the District Assessment Coordinator (DC), with SC and Principal signatures, no later than five business days after testing concludes in the school.

Did all school staff receive training in test administration, security procedures, and reporting requirements? This includes, but is not limited to, staff who oversee administration activities, who administer or proctor state tests, or staff who handle secure materials?

□ Yes □ No

Did the DC approve the school's Test Security and Building Plan and test schedules?

□ Yes □ No

Did all school staff follow the school's documented Test Security and Building Plan?

□ Yes □ No

Were all secure materials kept in locked, limited-access storage areas, while following a chain- of-custody for checking materials out to TAs just prior to each test session and then immediately inventorying and checking materials back in at completion of each session?

□ Yes □ No □ Not Applicable

Were any materials that might help students answer test questions covered or removed from the test location?

□ Yes □ No

Were students provided access to all required accessibility features, as documented?

□ Yes □ No

Did you actively monitor test sessions throughout the school?

□ Yes □ No

If accommodated paper booklets were used, were student responses transcribed into a standard form test booklet?

□ Yes □ No □ Not Applicable

If assistive technologies were used was secure information removed from the testing device and network?

□ Yes □ No □ Not Applicable

Were all ancillary papers distributed during testing sessions (e.g., scratch paper, glossaries), collected, accounted for, and securely destroyed?

□ Yes □ No □ Not Applicable

Have all secure test materials been returned to the DC, following the chain-of-custody in the Test Security and Building Plan?

□ Yes □ No □ Not Applicable

Have you reported all test incidents to the DC?

□ Yes □ No □ Not Applicable

Were all required security, training, and reporting documents returned to the DC? This includes staff security reports, test schedules, test security and building plans, etc.

□ Yes □ No

Note exceptions and local actions taken.

□ Attachments submitted with this report.

School Test Coordinator Printed Name: _____

School Test Coordinator Signature: ______

Principal Printed Name: ______

Principal Signature: _____

Submit this original report (complete with wet or electronic signature) to the DC for retention. Retain a copy for school records. This report should be retained at school or district and available for audit, according to district retention policy.