

Review of Accommodations Used During NCEXTEND1 Testing

Student Name	
PowerSchool ID	
Case Manager	
Check if EC student is also identified as EL	<input type="checkbox"/> English Learner (EL)
Dates of Plan	Start Date:
	End Date:
Test	NCEXTEND1
Subject	

Complete one form per test. Before testing, complete the top of the form and Column 1. During/after testing, complete Column 2. Completed forms should be kept in the student's Individualized Education Program (IEP) folder to be accessible for future reference. Testing accommodations for the NCEXTEND1 should be consistent with the accommodations used routinely during classroom instruction and on similar classroom assessments.

Regular Administration Other Administration

School
Grade
Test Date
Assessor

Column 1: To Be Completed before Testing	Column 2: To Be Completed during/after Testing
Check the required accommodations documented on the student's IEP.	Was this accommodation provided to the student during testing?
<input checked="" type="checkbox"/> Example: <i>Test Read Aloud (in English)</i> Specify: Test Administrator Reads Test Aloud	Example: Yes
	Example: <i>The test administrator read aloud the entire test to the student, where permissible per the NCEXTEND1 assessment guide.</i>

<input type="checkbox"/> Braille Materials		
<input type="checkbox"/> Braille Writer/Braille paper		
<input type="checkbox"/> Large Print Materials		
<input type="checkbox"/> Assistive Technology Devices Specify:		
<input type="checkbox"/> Interpreter/Transliterators Signs/Cues Test		
<input type="checkbox"/> Magnification Devices		
<input type="checkbox"/> Word-to-Word Bilingual (English/Native Language) Dictionary/Electronic Translator (EL only)		
<input type="checkbox"/> Test Read Aloud (In English) Specify:		
<input type="checkbox"/> Multiple Testing Sessions Specify:		
<input type="checkbox"/> Testing in a Separate Room		
<input type="checkbox"/> Adaptations to NCDPI-provided manipulatives, such as raised lines, enlarged text/pictures, placement of pictures on information boards, and use of student-specific symbols		
<input type="checkbox"/> Special NCDPI-Approved Accommodation(s) Specify:		

Printed name of the person completing this portion of the form:	Printed name of the person completing this portion of the form:
Signature of the person completing this portion of the form:	Signature of the person completing this portion of the form:

Comments/considerations for next IEP team meeting: