



RIDE NECAP MONITORING INTERVIEW QUESTIONS:

District Test Coordinator

District Test Coordinator (TC): _____

District: _____

Date: _____

RIDE Monitor: _____

	Yes	No	Question	Notes
BEFORE Testing	<input type="checkbox"/>	<input type="checkbox"/>	Did you establish a district-wide testing schedule? <i>NOTE: If yes, ask for a copy and/or description of the process used. If no, ask how schools' schedules were established.</i>	
	<input type="checkbox"/>	<input type="checkbox"/>	Do you have a protocol for ensuring that all students assigned to your district are tested, <i>including</i> those receiving services at out-placement facilities located both in-state and out-of-state? <i>NOTE: If yes, ask for a copy and/or description.</i>	
	<input type="checkbox"/>	<input type="checkbox"/>	Did you attend one of RIDE's NECAP Test Coordinator Workshops? <i>NOTE: If no, ask if District TC read the NECAP Test Coordinator Manual this year.</i>	
	<input type="checkbox"/>	<input type="checkbox"/>	Do you require all School TCs/Principals to attend one of the Test Coordinator Workshops? <i>NOTE: If no, ask how District TC ensures School TCs/Principals are properly trained.</i>	
DURING Testing	<input type="checkbox"/>	<input type="checkbox"/>	Do you have a protocol for processing student exemption requests? <i>NOTE: If yes, ask for a copy and/or description.</i>	
	<input type="checkbox"/>	<input type="checkbox"/>	Do you monitor whether schools in your district administer the NECAP tests in accordance with RIDE's policies and procedures? <i>NOTE: If yes, ask how. If no, ask why not.</i>	
	<input type="checkbox"/>	<input type="checkbox"/>	Do you have a district-wide protocol for handling disruptions during testing? <i>NOTE: If yes, ask for a copy and/or description.</i>	
	<input type="checkbox"/>	<input type="checkbox"/>	Do you have a district-wide protocol for student exemption requests and makeup testing? <i>NOTE: If yes, ask for a copy and/or description.</i>	

		Yes	No	Question	Notes
AFTER Testing	<input type="checkbox"/>	<input type="checkbox"/>		Do you have a district-wide protocol for documenting test security issues/violations? NOTE: <i>If yes, ask for a copy and/or description.</i>	
	<input type="checkbox"/>	<input type="checkbox"/>		Do you maintain copies of completed and/or filed “ <i>District Assurances</i> ” forms such as Form 2 (<i>Parent/Guardian Consent Form</i>) or Form 3 (<i>Treating Physician/Mental Health Worker Form</i>)? NOTE: <i>If yes, ask to see examples.</i>	
	<input type="checkbox"/>	<input type="checkbox"/>		Do you maintain copies of completed and/or filed “ <i>Principal’s Certification of Proper Test Administration</i> ” forms for each tested grade? NOTE: <i>If yes, ask to see examples. There should be one per grade for each school in the district.</i>	
	<input type="checkbox"/>	<input type="checkbox"/>		Do you maintain copies of completed and/or filed “ <i>Affirmation of Test Security</i> ” forms of all personnel in the district who have (or have had) access to testing materials? NOTE: <i>If yes, ask to see examples.</i>	
	<input type="checkbox"/>	<input type="checkbox"/>		Do you have any comments/questions/concerns about NECAP?	

RIDE Monitor Comments *(use other side if necessary):*