Sample CBT Administration Forms and Materials for Testing (Appendix A, excerpted from the spring 2024 TCM)

# **Appendix A**

Sample CBT Administration Forms and Materials for Testing



**Note:** For sample materials unique to paper-based testing, see the end of Appendix C.

### **CBT Proctor Testing Ticket**

### **Proctor Testing Ticket**

Session Name

TEST SESSION

IMPORTANT NOTE FOR TEST ADMINISTRATORS: This testing ticket should ONLY be used by the test administrator to log into TestNav when administering the Human Reader or Human Signer accommodation. No responses should be entered into the test using this Proctor Testing Ticket, as they will not be saved; students must log in using their own Student Testing Ticket. When you are ready to access the test, log into the TestNav app on your device or use the following URL to access the test:

Select Rhode Island in the application or go to https://ri.testnav.com/

 Username
 proctor113522

 Password
 385C6E

### **CBT Student Testing Ticket**

### STUDENT TESTING TICKET

 Student:
 WARD, JONATHAN A

 Student ID:
 6630199684

 Session:
 TEST SESSION

 Date of Birth:
 2009-11-11

 Test:
 Grade 8 ELA ♠

Please raise your hand if any of the information above is incorrect. Your test administrator will give you instructions before beginning the

test. You will need to enter in the username and password below.

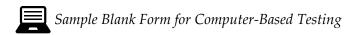
(Optional) School testing device ID: Session 1 \_\_\_\_\_ Session 2

### **CBT Student Roster**

### Session Student Roster Spring 20XX RICAS Gr. 3-8 Test Administration PROCTOR CACHE COMPUTER Precaching Computer Session Status Scheduled Start Date 20XX-04-26 Ready Session Name SAMPLE SESSION Scheduled Start Time 08:00 AM Organization SAMPLE SCHOOL (99999999) Actual Start Date 20XX-04-26 Test Grade 8 ELA Actual Start Time 09:20 AM Proctor Reads Aloud Lab Location Human Read Aloud Form Group Type Password D787AC 4 Results Student Name Student Code Date of Birth Status Username Signature Form/Form Group LASTNAMEA, FIRSTNAMEA 999999999 2009-06-17 Battery 19EL08SPHREN01 999999999 LASTNAMEB, FIRSTNAMEB 888888888 2009-09-30 Battery 19EL08SPHREN01 888888888 LASTNAMEC, FIRSTNAMEC 777777777 2009-09-21 Battery 19EL08SPHREN01 777777777 LASTNAMED, FIRSTNAMED 666666666 2009-11-02 Battery 19EL08SPHREN01 666666666

### **CBT Accommodations Report**

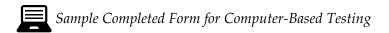
Jper	rational	Operational Reports																
NP	Report	- Accessib	ility Feat	ures an	d Acc	ommo	PNP Report - Accessibility Features and Accommodations for Student Tests	Studer	ıt Test	ω.								Exit Report
List of	students and	List of students and tests with identified Accessibility Features and Accommodations	d Accessibility	Features and	Accomm	odations												
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Ğ	Grade 8 ELA			•														
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~																		•



## Spring 2024 RICAS Administration Test Materials Internal Tracking Form

Principals must account for all secure materials at all times. Use this form to track the distribution and return of all secure materials.

Test Administrator's N	Name:		Room	Number:
Grade:	Subject/Se	essions:		
Mate	rials Moved f	rom Locked Stora	ge Area to Room #	
Date:			Time:	
		# of Student Testing Tickets	# of Proctor Testing Tick Accommodations (See T	cets for Certain CM for details.)
Principal's or Design	nee's Count			
Test Administrator's	Count			
Principal's or Design	nee's Signature	:	Test Administrator's Signature:	
Mate	rials Moved f	rom Room #	to Locked Stora	ge Area
Date:			Time:	
		# of Student Testing Tickets	# of Proctor Testing Tickets for Certain Accommodations	Scratch Paper Used? (no count needed)
Principal's or Design	nee's Count			☐ Yes ☐ No
Test Administrator's	Count			☐ Yes ☐ No
Principal's or Design	nee's Signature	:	Test Administrator's Signature:	
Date:				
Check this box to	confirm that s	cratch paper and tes	ting tickets have been securely de	estroyed at the school.
	Retain th	is document in you	r school files for three years.	



# Spring 2024 RICAS Administration Test Materials Internal Tracking Form

Principals must account for all secure materials at all times. Use this form to track the distribution and return of all secure materials.

Test Administrator's Name: Alex	ander Smith	Room	Number:250	
Grade: 3 Subject/Se	essions: Mather	natics		
Materials Moved fo	om Locked Stora	ge Area to Room #250	)	
Date: 5/1/24		Time: 8:30 a	.m.	
	# of Student Testing Tickets	# of Proctor Testing Tick Accommodations (See T		
Principal's or Designee's Count	15	15		
Test Administrator's Count	15	15		
Principal's or Designee's Signature: Test Administrator's Signature:				
Jennifer Brown		Alexander Si	mith	
Materials Moved fr	om Room #	250 to Locked Stora	ge Area	
Materials Moved from Date: 5/1/24	om Room #	250 <b>to Locked Stora</b> Time: 2:00 p		
F/1/2/	# of Student Testing Tickets	to Locked Stora		
F/1/2/	# of Student	Time: 2:00 p	.m. Scratch Paper Used?	
Date:5/1/24	# of Student Testing Tickets	Time: 2:00 p  # of Proctor Testing Tickets for Certain Accommodations	Scratch Paper Used? (no count needed)	
Date:5/1/24  Principal's or Designee's Count	# of Student Testing Tickets 15	Time: 2:00 p  # of Proctor Testing Tickets for Certain Accommodations	Scratch Paper Used? (no count needed)  Yes No Yes	
Date: 5/1/24  Principal's or Designee's Count  Test Administrator's Count	# of Student Testing Tickets 15	Time: 2:00 p  # of Proctor Testing Tickets for Certain Accommodations  15	Scratch Paper Used? (no count needed)  Yes No Yes No	
Date:5/1/24  Principal's or Designee's Count  Test Administrator's Count  Principal's or Designee's Signature:	# of Student Testing Tickets 15	Time: 2:00 p  # of Proctor Testing Tickets for Certain Accommodations  15  15  Test Administrator's Signature:	Scratch Paper Used? (no count needed)  Yes No Yes No	

Retain this document in your school files for three years.



# Principal's Certification of Proper Test Administration Spring 2024 RICAS

I certify that the information provided on this form is correct to the best of my knowledge Comprehensive Assessment System (RICAS) tests were administered according to RICAS Test Coordinator's Manual and the Test Administrator's Manuals posted at 1	the test administration procedures outlined in the
Principal's Signature:	
Password (same password used to log in):	
Date:	May 30, 2024

Information entered on this form will not be saved until you click Submit this form below.

Submit this form

Sample Blank Internal Form

# Spring 2024 RICAS Administration Confirmation of Training Participation and Receipt of *Test Administrator's Manuals* (TAMs) and Test Security Requirements

**Test administrators** must sign below to indicate they have attended their school's RICAS training session and have received a copy of the RICAS TAM for the test they will be administering.

**Other school staff members who have access to secure materials** must sign below to indicate they have attended their school's RICAS training session and have received a copy of the RICAS test security requirements in this manual.

Test coordinators should retain this document in their school files for three years.

Date of Training	Time	Printed Name of Individual	Individual's Role (e.g., Test Administrator, Test Coordinator, Hallway Monitor)	Signature of Individual By signing below, I acknowledge that  1. I am documenting my attendance at my school's RICAS training session in proper test administration protocols and procedures.  2. I am receiving the RICAS TAM for the test I will administer or the RICAS test security requirements. I will read and understand the protocols in it, and I will abide by the terms specified within.

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