



NECAP General Assessment: 2009-2010

Request for Use of "O-Other" Accommodation — Due by First Week of Testing

(When occurs, double click to check (or uncheck) this box. Otherwise, just type in text.)

STUDENT

Student First Name:

Today's Date:

Gender: Male Female

Student Date of Birth: mm/dd/yyyy

Current Grade (As of 10/1/2009): 3 4 5 6 7 8 11

Student SASID (10 digit state code):

SCHOOL

School Contact Person:

Position/Title:

Phone:

Email:

Name of Responsible/Liable District:

Name of School of Enrollment:

Address of School:

1. Request to use Other Accommodation(s) during what test? (Content Area(s) and Session(s))

Reading Session(s): 1 2 3

Writing Session(s): 1 2

Math Session(s): 1 2 3

Science Sessions(s): 1 2 3

2. Fully describe each requested accommodation: What assistance will the student receive, and what will the student do independently? (Attach an additional page if needed. If you have questions please call or email the department.)

3. Assurances: (Please check below to confirm these steps have been taken.)

- The school team has met and has considered all standard accommodations prior to proposing this/these accommodation(s).
- Parent(s)/guardian(s) were provided an opportunity to participate in the decision-making process.
- The proposed accommodation is consistent with supports provided during routine class instruction and/or test-taking.

E-mail or FAX this completed form to:

Gaye Fedorchak
FAX: (603) 271-7381
Office: (603) 271-7383
gfedorchak@ed.state.nh.us

Upon receipt of this information, NH DoE will provide *written notification of approved* "other accommodations" to the contacting school official regarding the status of this request. For additional information on the use of accommodations during assessment, See: *NECAP Accommodation Guide (updated Sept. 2009)*. The Guide and this form are both available online at: <http://www.ed.state.nh.us/NECAP>, then choose "Fall 2009 Materials and Information" from the second set of links.