

## **Early Stopping Rule Verification Form**

Date: \_\_\_\_\_

Student Name: \_\_\_\_\_

10-Digit Student ID #: \_\_\_\_\_

## **Test Administrator Section**

I verify that the above listed student has met the Early Stopping Rule criteria listed below for the HSA-Alt in the following content area(s) (check all that apply):

□ English Language Arts (ELA) □ Mathematics □ Science (NGSS)

I verify that the following conditions were met:

- 1. The student did not respond to the first eight items in the assessment(s).
- 2. The eight items were administered across two different sessions on two different days (4 + 4 = 8).
- 3. The "No Response" option was entered for the student by me, as the Test Administrator, for each of the eight items.
- 4. I provided the student with appropriate communication and accessibility supports during testing and sufficient response time.
- 5. A Test Session Observer was present and observing the student for response for at least four of the eight items that were delivered.

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

## **Test Session Observer Section**

I verify that the above listed student did not exhibit a response for at least four of the eight items that were delivered for the following content area(s) (check all that apply):

□ English Language Arts (ELA) □ Mathematics □ Science (NGSS)

I verify that the following conditions were met:

- 1. I was present and observing the student for a response for at least four items in this content area.
- 2. I did not observe the student respond to any of the items that were presented by the Test Administrator in this content area test.
- 3. I believe that the Test Administrator provided the student with appropriate communication and accessibility supports during testing and sufficient response time.

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Verified: Y or N Name and Date: Assessment Section Use Only

Email a scanned copy of the completed form to the Assessment Section at <u>hsa-alt@k12.hi.us</u>. Or fax the completed form to the Assessment Section at (808) 733-4483. The school Test Coordinator should retain the original form for documentation purposes.