# 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:

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

Email a scanned copy of the completed form to the Assessment Section at [hsa-alt@k12.hi.us](mailto:hsa-alt@k12.hi.us).

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.