



OREGON ADULT BASIC SKILLS WIOA TITLE II ADULT EDUCATION AND LITERACY GRANT

OREGON ASSESSMENT SIGNATURE PAGE

Return your signed form to HECC.absteam@HECC.oregon.gov (Note: You do NOT need to send a copy of your certificate).

I, _____, have read and understand the following document: Oregon ABS Policy Manual, Sections 6.1 and 6.5, and completed the following training:

- CASAS Initial Certifications - eTest Proctor** Date: _____
- CASAS Initial Certification - eTest Coordinator** Date: _____
- CASAS Initial Certification - Remote Proctor** Date: _____
- CASAS Initial Certification – Paper Proctor
(For new paper test proctors as of July 1, 2022)** Date: _____
- CASAS Refresher Training (every 3 years; see
training.casas.org for options by modality and role)** Date: _____
- BEST Plus 2.0 Initial Certification (provided by State
Trainer)** Date: _____
- BEST Plus 2.0 Annual Refresher Training (at local level)** Date: _____

Signature

Title

College/Institution

ABS Director Name and Signature

Date