

ELPA Screener Accompanying Caregiver Form

This form is for caregiver adults who will join a student while they take the ELPA Screener. If you sign this form, you are saying:

- I will let the student do their own work. I will not help or distract them.
- I will not look at, or tell people about, test information such as:
 - test questions
 - answers
 - personal information, like ID numbers, names, and birthdates
- I will not record video or sound. I will not take pictures.
- I will tell school staff right away if something interferes with the student testing experience.

Student name (print): _____

Caregiver name (print): _____

Caregiver Signature: _____

School: _____

District: keep on file for one year

This is a simplified version of the Non-TA Assurance of Test Security Form.