



# OEAA Assessment Security Compliance Form

This document is designed to ensure that all individuals involved with the handling of any Michigan assessments understand the secure nature of the assessments and will comply with the security guidelines as stated in the **Assessment Integrity Guide (AIG)** and assessment administrator manuals. By signing this document, you certify that you understand and will comply with all security guidelines as stated in the **Assessment Integrity Guide** and assessment administrator manuals.

### Directions

**TO COMPLETE:**

1. Mark the corresponding box(es) next to your role(s) for the current assessment administration (for example, District Coordinator, Building Coordinator, etc.).
2. In the area under Educational Entity, district coordinators print district name only. All others print both district name and school name on the lines provided. If known, please provide school and district codes.
3. Date and sign the bottom of this page.

**IMPORTANT:**

Districts must keep all completed Security Compliance Forms on file at their district for a period of three years following the assessment window. Do NOT return completed forms to the testing contractor.

### 1. Assessment Roles (Mark ALL that apply)

- |  |   |
|--|---|
| <input type="checkbox"/> District Coordinator  | <input type="checkbox"/> Proctor                |
| <input type="checkbox"/> Technology Coordinator  | <input type="checkbox"/> School Administrator   |
| <input type="checkbox"/> Building Coordinator, Test Supervisor, or Back-Up Test Supervisor | <input type="checkbox"/> District Administrator |
| <input type="checkbox"/> Accommodations/SSD Provider or Test Accommodations Coordinator    | <input type="checkbox"/> Other _____            |
| <input type="checkbox"/> Assessment Administrator or Room Supervisor                       |   |

### 2. Educational Entity (PLEASE PRINT – Use full names)

School Name: \_\_\_\_\_ School Code: \_\_\_\_\_  
 District Name: \_\_\_\_\_ District Code: \_\_\_\_\_

### 3. Assurances

**I agree and assure that:**

1. I have access to and have read the AIG, especially the sections applicable to assessment security, preparation, and administration.
2. I have received training on the appropriate administration of the state assessments.
3. I have read the information and applicable instructions provided in the Test Administration Manual and I agree to administer assessments according to these procedures.
4. I understand my obligations concerning the security and confidentiality of these tests.
5. I am aware of the range of penalties that may result from a departure from the documented test administration procedures for the state assessments, and am aware of the range of penalties that may result from a violation of test security and confidentiality.

6. I am aware of my obligation to report any suspected violations of test security.
7. I have not and will not keep, copy, reproduce, paraphrase, distribute, review, or discuss any test materials that have not been released via posting on the web by the MDE.
8. I will not use test items, test booklets/answer sheets, or any of the information contained in an assessment to review/prepare students for a test unless and until it is released via posting on the web by the Department.
9. I will not alter or influence students' responses in any manner (indicate answers, point out rationale, prompt, etc.)
10. I will not disclose individual student test scores or test performance data to unauthorized persons.
11. I will keep embargoed data secure until the public release of testing data by the Department.

**I, the undersigned, do certify and attest to all of the following:**

I have had access to a printed or electronic copy of the **Assessment Integrity Guide** as published by the Office of Educational Assessment and Accountability (OEAA) of the Michigan Department of Education (MDE); and

I have read the sections applicable to assessment security, preparation, and administration; and

I have read the section regarding the duties and responsibilities of my role in the assessment process; and

I have followed the practices found in the current assessment manual(s) as they relate to my role; and

I acknowledge that assessment materials are secure and it is my professional responsibility to protect their security and integrity.

**Date:** \_\_\_\_\_ **School Year:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Printed Name:** \_\_\_\_\_

Note: Electronic copies of the **Assessment Integrity Guide** and assessment administrator manuals are available at [www.michigan.gov/oeaa](http://www.michigan.gov/oeaa). For further information, contact the Michigan Department of Education, Office of Educational Assessment and Accountability (OEAA), 608 W. Allegan St., P.O. Box 30008, Lansing, MI, 48909, call toll-free **877-560-8378**, or e-mail [mde-oeaa@michigan.gov](mailto:mde-oeaa@michigan.gov).