



All staff who participate in a state assessment or handle secure assessment materials must be fully trained and sign this OEAA Assessment Security Compliance Form.

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.

Roles

<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"/> Accommodations Provider
<input type="checkbox"/> Assessment Administrator or Room Supervisor	<input type="checkbox"/> Other: _____

Building Information

School Name: _____ School Code: _____

District Name: _____ District Code: _____



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

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.

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. 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.