

Appendix D-2 SAT College-Board – Approved Accommodations Form

This form is meant assist IEP teams in selecting accommodations for students on the SAT. All information should be submitted on College-Board's forms/online. (The list below is not comprehensive. Contact CB for additional accommodations)

Student Name: _____ DOB _____ Date _____

Select the Appropriate Assessment: SAT with Essay PSAT 10 PSAT 8/9

COLLEGE-BOARD Reportable and Allowable Accommodations	Description	Reading	Math	Essay	COLLEGE-BOARD Reportable and Allowable Accommodations	Description	Reading	Math	Essay		
TIMING/SCHEDULING					SETTING						
	Time and a Half (50%)	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Small group	6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Double time (100%)	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		One-to-one setting		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	More than double time (100%)	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Late start time		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Preferential seating	6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Limited testing time		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Wheelchair accessibility		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Extra breaks	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Home/Hospital setting	6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Extended Breaks	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	OTHER					
	Breaks as needed	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Four-function calculator	6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Multiple day	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Auditory Amplification/FM system		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
READING/SEEING					Permission for food/ medication						
	Large print test book ____pt	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Permission to test blood sugar	6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Human Reader	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Noise buffers		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Use of a highlighter		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	STATE-ALLOWABLE ACCOMMS (not reportable)					
	**Sign Language Interpreter for Oral Instructions	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		ASL – test content		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Non electronic or electronic magnifying devices		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		ASL – student responses		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Colored Overlays		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Bilingual dictionaries not approved		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Braille	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		EL- Math Only		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Raised line drawings	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ENGLISH LEARNER SUPPORTS (reportable and allowable)					
	Pre-recorded audio (MP3)	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Translated test directions	6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Assistive technology-compatible	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Word-to-word glossaries	7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Printed copy of verbal instructions		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		EL Time and one half (50%)	7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Hand-held magnifiers		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
RESPONDING											
	Writer/Scribe	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Tape recorder		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Computer	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Braille device for written responses	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Record answers in test booklet	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Large-block answer sheet	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>