

School Name \_\_\_\_\_

Regular

English/Language Arts Tests

- ☐ Grade 3 EOG ELA
- ☐ Grade 4 EOG ELA
- ☐ Grade 5 EOG ELA
- ☐ Grade 6 EOG ELA
- ☐ Grade 7 EOG ELA
- ☐ Grade 8 EOG ELA
- ☐ NC Check In Gr. \_\_\_\_\_
- ☐ READ TO ACHIEVE

Mathematics Tests

- ☐ Grade 3 EOG Math
- ☐ Grade 4 EOG Math
- ☐ Grade 5 EOG Math
- ☐ Grade 6 EOG Math
- ☐ Grade 7 EOG Math
- ☐ Grade 8 EOG Math
- ☐ NC Check In Gr \_\_\_\_\_

Science Tests

- ☐ Grade 5 Science
- ☐ Grade 8 Science

EOC Tests

- ☐ Math I
- ☐ Biology
- ☐ English II

Miscellaneous Tests

- ☐ Field Tests
- ☐ ACT PLAN

- ☐ NC Final Exam  
(State Test Below)

- ☐ ACT EXPLORE

- ☐ CTE Postassessment-state below  
\_\_\_\_\_

EC* 504* LEP* Sessions (YES/NO)	Testing Session Time	Homeroom # or Class Period	Name of Administrator	Proctor Name	# of Pupils	Testing Room #

Please list the specific students for each Accommodation-Use additional sheets if necessary  
(Please place an X in the box for ALL that apply)

STUDENT NAME (LAST, FIRST)	Name of Admin	HomeRm # Or Class Period	Read Aloud (NOT allowed on READING or ENGLISH II  Specify which type	Testing in a Separate Room	Large Print Test	Extended Time (IF this is the only accommodation, it can be in the regular setting and allow extra time at the end of the test)	Dictate to Scribe	Student Marks in Book	Multiple Testing Sessions

Principal’s Signature \_\_\_\_\_ Date \_\_\_\_\_

Building Level Testing Coordinator’s Signature \_\_\_\_\_ Date \_\_\_\_\_

EC Chairperson’s Signature \_\_\_\_\_ Date \_\_\_\_\_

Section 504 Chairperson’s Signature \_\_\_\_\_ Date \_\_\_\_\_

LEP Chairperson’s Signature \_\_\_\_\_ Date \_\_\_\_\_