



Kentucky Performance Rating for Educational Progress (K-PREP) Building Assessment Coordinator's 2020 Certification of Proper Test Administration

I certify that, to the best of my knowledge:

- Everyone involved with the state-required assessments has received training on the Administration Code for Kentucky's Educational Assessment Program and, if appropriate, the Inclusion of Special Populations in the State-Required Assessment and Accountability Program. Records of training and participants are maintained on file in the school or district;
- Everyone involved with the state-required assessments has read and signed a copy of the Appropriate Practices Form, the Nondisclosure Agreement Form, the Administration Code for Kentucky's Educational Assessment Program, and, if appropriate, the Inclusion of Special Populations in the State-Required Assessment and Accountability Program. Copies of the signatures are maintained on file in the district;
- Every effort was made to administer the state-required assessments to all students;
- Checks and processes to monitor appropriate test security have been completed, including required seating charts, room location codes and Student Honor Code;
- Student information in the Student Data Review and Rosters (SDRR) system was completed properly for every student enrolled on the first day of the testing window, whether or not he/she was tested; and
- The test was administered in accordance with the directions in the District and Building Assessment Coordinator's Manual and Test Administrator's Manual/Script.

Further, I certify that:

- All test materials are being returned to the vendor as directed. If any test materials have inadvertently been left in the district, they will be secured and returned to the vendor immediately;
- I have informed the Kentucky Department of Education of any inappropriate incidents involving secure test materials that have occurred in my district. This includes reproduction of test materials (in whole or in part), sharing answers to test questions, and improper test administration procedures or inappropriate accommodations; and
- I have submitted this Certification of Proper Test Administration to the District Assessment Coordinator.

Building Assessment Coordinator

Print Name _____

Signature _____

School _____

Date _____

Please return the completed BAC Certification of Proper Test Administration to your District Assessment Coordinator to keep on-file.