www.iseetest.org

# TESTING WITH ACCOMMODATIONS

2012-2013

# Eligibility

A student with a documented disability may be eligible for accommodations on the Independent School Entrance Exam (ISEE). To be eligible, the student must:

- Have a disability that necessitates testing accommodations,
- Have complete and specific documentation that establishes a current need for the requested accommodations,
- Currently receive and utilize the requested accommodations, due to the disability, on a regular basis for school-based testing in the student's present school environment.

### Review Process

- Submit all items listed in the checklist from page 2 together at least five WEEKS prior to the requested testing date. Please do not submit items separately as that will delay the approval process.
- When ERB has received your application, an email will be sent to confirm that the approval process has begun. This email is NOT AN APPROVAL. Please call ERB at 1-800-989-3721, ext. 2613, or 212-672-9813 if you do not receive this email.
- If there is any problem with the application, the ISEE reviewer will call or email you to resolve the issue.
- In about three to four weeks, you will receive a Verification Letter by email confirming the test site, date, and approved accommodations. This letter will serve as your entrance ticket to the testing session. Contact the ISEE Operations Office at 1-800-446-0320 if you have not received the Verification Letter by email after four weeks.

# Accommodation Requests

The goal of offering accommodations is to provide equal access to all students taking Educational Records Bureau tests. Accommodations requests must be current to the student's needs. An application with complete documentation must be submitted each time the student tests with ISEE, even if accommodations were approved for previous testing.

All documentation sent to ERB is kept strictly confidential, and the information is not released to the schools when the score reports are sent. The test site will be notified of the approved accommodations only so they can make the appropriate arrangements.

# Testing Locations

Accommodations are not available at every testing location. You may pre-register online for an "open" accommodations test site at www.iseetest.org. You will then receive required paperwork by email. To register for a "closed" test site or an ISEE testing office that offers accommodations, please complete pages 3 and 4 of this Testing with Accommodations Form and submit them back to the ERB Office for review/approval along with a copy of the supporting documentation. Special arrangements can be made on a case by case basis if there are no testing locations in your area offering the specific accommodations requested on your school statement. Contact ERB at 1-800-989-3721 ext. 2613, or 212-672-9813 or email iseeaccommodations@erblearn.org if you need to make special arrangements.

Testing Accommodations for the ISEE are not currently available at Prometric testing centers. They only offer the ISEE online for applicants to grades 5-12.

Also, please note that the online list of test sites is updated on a regular basis. Testing locations often fill to capacity. When this happens, we will close the site on the list and on the online registration.

The Educational Records Bureau is committed to providing appropriate accommodations for all eligible students on the Independent School Entrance Exam (ISEE).

# TESTING WITH ACCOMMODATIONS

# Checklist for Completion of the Application

### ☐ STEP 1: Registration Information

(on page 3 of this application)

Print the information requested clearly. Double check that your email address is written clearly, because we use this address to contact you with questions and status issues. Double check that you have chosen a test site and date. You must also include at least one school to receive a score report.

### ☐ STEP 2: Payment (on page 3 of this application)

Check which type of testing situation you are applying for and any extra services you are requesting. Include credit card information and billing address if different from home address. Fees must be paid in full before a student's registration can be processed.

☐ STEP 3: Parent Agreement (on page 4 of this application) Sign and date.

### ☐ STEP 4: Current School Statement

(on page 4 of this application)

This form must be filled out by the student's current school to verify that the accommodations requested are currently being used in classroom and testing situations. The school should initial the list of accommodations the student requires. If the student's needs are not listed, then check "other" and explain on the lines provided. If for some reason the student does not currently receive the accommodations requested in the current school setting, this should also be explained (such as the school already incorporating an adapted curriculum).

### ☐ STEP 5: Documentation

This information must be submitted and be current (within the last three years). In addition to the items listed above, documentation for the specific disability requiring accommodations must also be included.

- This documentation must state the specific disability, as diagnosed.
- This documentation alone does not guarantee that a student is eligible for testing accommodations on the ISEE.

### Please submit one or more of the following forms of documentation:

### Formal Testing

A complete psycho-educational evaluation qualifies if:

- Standardized testing is performed by a licensed professional and describes the comprehensive testing and techniques used to arrive at the diagnosis, including evaluation date(s) and test results with subtest scores from the measure of cognitive ability, academic achievement, and information processing.
- It includes credentials of the evaluator.
- Testing was completed within three years of when the ISEE accommodations application is submitted, or includes a recent re-evaluation of the specific areas requiring accommodations.

# Individualized Educational Plan (IEP) or 504 Plan from the Current Calendar Year

Required pages are:

- Data page (includes date of meeting, student information, city and school district, etc.).
- Signature page of people who attended the meeting (must have signatures).
- Accommodation page listing all testing and classroom modifications mandated by the IEP or 504 Plan.

An application for an IEP or 504 Plan review does not qualify. The pages detailing annual goals and objectives are NOT needed.

### School Accommodation Plan from the Current Calendar Year

This would be a private, independent, or special education school's version of an IEP and must include:

- A detailed description of the functional limitations of the student written on school letterhead and signed by at least two educational or psychological professionals.
- Description and results of in-house testing that was completed to determine eligibility for an accommodation plan.
- All dates of implementation and list of modifications to the student's classroom and testing environment.

### Physician Letter

A letter from a medical doctor may qualify if:

- The accommodations are required due to a medically-treated issue (such as an injury, a vision impairment, deafness, paralysis, ADD, ADHD [treated with prescriptions], etc.), a psychological condition, or a physical disability.
- The doctor describes diagnosis and current treatment.
- The letter is written on letterhead and includes credentials, office address, and date.

NOTE: Please take note that additional documentation may be requested.

# STEP 1: Registration Information

# **TESTING WITH ACCOMMODATIONS 2012-2013**



This form and all supporting materials must be submitted together and received 5 weeks in advance of the requested test date.

For proper processing of the accommodation request(s), please submit: 1) This registration form 2) Payment 3) Parent Agreement 4) Current School Statement and 5) Complete educational documentation to:

By fax: Or	Scan and email to:		
212-370-4095	submit@erblearn.org		
Processing will not begin until all required materials are received. This is your formal ISEE registration form; you do not need to con	mplete the bubble registration form.		
Student's First Name:	Student's Last Name:		
Address:			
City, State, Zip:			
Home Phone:	Office Phone*:		
Parent's Cell Phone*:			
Parent's Email Address:			
Sex of Student:	Birthdate:		
Current Grade:	Grade Applying For:		
Requested ISEE Test Site:	Requested ISEE Test Date:		
School(s) to receive ISEE score report (up to six for testing fee):			
*optional			
Fees			
The following represents the 2012-13 fee schedule for all ISEE tests. Please select one testing location. <i>Please do not register</i> for a standard test as that may require a change of test site fee.	Additional services/fees:  Online Reporting Service (optional): \$30 See page 8 of ISEE Student Guide.		
Choose one of the following:	☐ Telephone Reporting Service (optional): \$30 See page 8 of ISEE Student Guide.		
Testing at a School: \$98 Small group administration.	☐ What to Expect on the ISEE (optional) For information and ordering options for What to Expect		
Testing at an Office (small group): \$145	on the ISEE books, please reference page 3 of the ISEE Student Guide, www.iseetest.org, or call 1-800-446-0320.		
Only available in certain locations: CT, FL, MA, NY, TX  Testing at an Office (individual): \$180	☐ Change of Test Site Fee: \$25		
Only available in certain locations: CT, FL, MA, NY, PA, TX	☐ Late Fee: \$20  Assessed when files are submitted between the 4 and 5-wee required registration date. Registration cannot be accepte after the 4-week deadlines and walk-in testing with accommodations is not available.		
☐ Pay by credit card ☐ Visa ☐ Mastercard ☐ Ame	erican Express Total Fees:		
Card Number:	Expiration Date:		
Card Holder's Name (please print):			
Card Holder's Signature:			
Please indicate billing address if different from home address:			

# TESTING WITH ACCOMMODATIONS 2012-2013



# STEP 3: Parent Agreement

I wish to apply for testing accommodations on the Independent School Entrance Exam (ISEE). I agree to give the Educational Records Bureau permission to view the documentation that I, schools, and/or licensed professionals submit in conjunction with this application for requested testing accommodations. I agree to the conditions set forth in this publication and the testing conditions stated in the ISEE Student Guide. I attest that all information I have provided is true and accurate.

Parent or Guardian's Name:			
Parent or Guardian's Signature:		Date:	
STEP 4: Current School States This section must be completed by student's c The Head of School or Principal must complete requests for student accommodations. By comp such a designation and has authorized him or h	urrent school only.  e this form unless the school has a specialist resuleting this section, such individual certifies that	the Head of School or Princip	al has made
	is a current student at		School
He/she currently receives and utilizes each of t	he accommodations that I have initialed below	for school-based tests:	
Extended Time (1 1/2 times)	Computer for essay	Braille	
Large-print test	Computer with spell-check	Other	
Circle in test booklet	for essay		
	Use of calculator		
If additional space is required, please include a seg	parate sneet of paper. Please describe the circums	rances in which accommodations	are required
If the child does not use the requested accomm	nodations for school-based tests, please explain	:	
Name (print):	Title:		
Signature:	Phone Number:		
	Date:		

### STEP 5: Documentation

This information must be submitted and be current (within the last three years). Please refer to page 2 for details.