

**Computer-Based Test Administration Waiver  
  
Spring 2018**

The majority of New Mexico state assessments are administered in a computer**-**based test format. ***The Public Education Department (PED) expects schools to administer at least 98 percent of the spring 2018 assessments via computer-based testing mode.***

While all schools are expected to administer assessments in computer-based mode, PED may allow schools to use paper-based testing, but only in extenuating circumstances as outlined below.

There are rare instances in which a **school** may need to administer some tests in paper format:

* **Device Number:** The combination of device and student counts does not allow for completion of 100-percent computer-based testing within the assessment window.
* **Infrastructure**: Local bandwidth is inadequate for 100-percent computer-based testing.

For these two cases, an approved waiver is required. Please note this waiver is valid only for spring 2018.

There are also two instances in which an individual **student** may need a paper-based test administration:

* **Student with Disabilities:** A student has an IEP or 504 Plan that specifies paper-based testing.
* **Recent Transfer Student Lacking Computer Skills**: A student transfers into the school *within the three months prior to testing* and does not have adequate computer experience/skills for computer-based testing.

Students in these categories may test in paper without a waiver. Schools must document the rationale for the paper-based test administration and be prepared to provide this information to PED upon request.

**Deadline for Submission of Waiver Request**

The computer-based testing waiver can be found on the next page and must be e-mailed to [ped.assessment@state.nm.us](mailto:ped.assessment@state.nm.us) by **December 1, 2017**. Please put **CBT waiver** in the subject line.

**Computer-Based Testing Waiver for Spring 2018**

**Please type responses. All boxes will auto-expand.**

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| **Districts** (including district charter schools) must complete rows a–g.  **State charter schools and state-supported institutions** skip rows a–g and go to row h. | | |
| a | Name of District | Click here to enter text. |
| b | Superintendent Name | Click here to enter text. |
| c | Superintendent E-mail Address | Click here to enter text. |
| d | Superintendent Phone Number | Click here to enter text. |
| e | Name of District Test Coordinator (DTC) | Click here to enter text. |
| f | DTC Phone Number | Click here to enter text. |
| g | DTC E-mail Address | Click here to enter text. |
| Complete rows h–j if the waiver request is specific to a **state charter, state-supported institution, or specific school(s) within the district**.  **Note**: One waiver request may be used for an entire district. In that case, skip rows h–j and go to row k. | | |
| h | Name of School(s) | Click here to enter text. |
| i | Name of Principal | Click here to enter text. |
| j | Name of School Test Coordinator | Click here to enter text. |
|  | | |
| k | Date of submission | Click here to enter a date. |
| l | Name of individual submitting waiver | Click here to enter text. |
| m | E-mail of individual submitting waiver | Click here to enter text. |
| n | Check the reason for your request: | Device number  Infrastructure |
| o | Describe the rationale for the request. | Click here to enter text. |
| p | List the assessment(s) (grade level and subject) for which you would like to use paper-based testing. *Example: PARCC 5th Grade ELA, Geometry, etc.* | Click here to enter text. |
| q | Provide the numbers of students proposed to test on paper and in computer-based mode. These two numbers should add to the total number of students being tested. | Paper: Click here to enter text.  Computer: Click here to enter text.  Total Students: Click here to enter text. |
| r | Detail your plan to achieve 100% computer-based test administration by spring 2019. | Click here to enter text. |

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| FOR PED INTERNAL USE ONLY | |
| Reviewed by | |
| **Rationale for approval:** | Date: |
| **Rationale for DENIAL:** | Date: |
| Concur with staff recommendation:  Director of Assessment, Accountability, and Evaluation or designee | Date: |