



NJ ACCESS and Alternate ACCESS for ELLs: Unique Accommodation Request Form

Directions: If an ELL student with a disability requires an accommodation (i.e., a “unique accommodation”) that is not listed in the *ACCESS for ELLs Accessibility and Accommodations Supplement*, and does not change the construct being measured by the test, the school may request the use of an accommodation not currently listed in the manual by using this form.

If approved, the accommodation must be listed in the Individualized Education Program (IEP) or 504 plan for a student with a disability, and the ELL plan. To request approval for a unique accommodation, the fully completed form must be submitted to the ACCESS for ELLs state contact by the principal or designee or District Test Coordinator at least two weeks prior to testing to ensure a timely state response is received. A copy of this form must be kept in the student’s file and, if appropriate, retained at the district office.

Contact Information

Name of Principal/Designee/DTC:

Date:

District Name:

School Name:

Telephone Number:

Email Address:

Signature:

Student Information

Student Initials:

Last 4 Digits Student ID (SSID):

Grade:

DOB:

ACCESS/Alternate ACCESS for ELLs Administration

Administration Year:

For which ACCESS assessment and domain(s) are you seeking approval to use the unique accommodation:

Provide a brief description of the accommodation for which you are requesting approval:

Describe the evidence that supports the need for this accommodation, including how it is used by the student in the classroom or on other assessments:

Describe the planning needed for this accommodation on ACCESS tests (e.g., school staff, space, specialized tools or equipment needed):

In submitting this form for approval, the principal/designee or assessment coordinator assures that:

- This accommodation will be documented in the student’s IEP or 504 plan, and EL plan.
- In the case of an IEP, the parent/guardian of the student must sign the amended IEP prior to testing.
- The school team has met and considered all listed accommodations before proposing this unique accommodation.
- The proposed accommodation is used, as appropriate, for routine class instruction and assessment.



For State (SEA) Use Only: Approval/Denial of Request (This completed section will be returned to your school prior to testing.)

This request has been: **Approved** **Denied**

State Staff Name and Position:

Signature:

Date: