

Test Administration Seating Chart

District: _____ Campus: _____ Rm #: _____ Date: _____

Test(s) Administered: _____ Subject/Grade Level: _____

Test Administrator(s): _____

Test Session Start Time: _____ Stop Time: _____

Instructions for completing the seating chart below:
 1. Write the name of each student on the testing roster **(B)** that matches the student's location on the seating grid **(A)**.
 2. Mark the location of the front of the testing area.

A. Seating Grid

1	2	3	4	5	6
7	8	9	10	11	12
13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

B. Testing Roster

Seat #	Student First Name	Student Last Name	Seat #	Student First Name	Student Last Name
1			16		
2			17		
3			18		
4			19		
5			20		
6			21		
7			22		
8			23		
9			24		
10			25		
11			26		
12			27		
13			28		
14			29		
15			30		