

State of Texas  
County of \_\_\_\_\_

Texas Education Agency  
Student Assessment Program

2017

## Oath of Test Security and Confidentiality for District Testing Coordinator

I do hereby certify, warrant, and affirm that I will fully comply with all requirements governing the student assessment program and do hereby certify the following:

(Initial each statement.)

- \_\_\_\_\_ I have received training on the appropriate administration of the state assessments;
- \_\_\_\_\_ I will read all coordinator directions and applicable manuals governing the administration of the student assessment program;
- \_\_\_\_\_ I will train the appropriate district personnel or ensure that appropriate district personnel are trained in general test administration procedures;
- \_\_\_\_\_ I will train the appropriate district personnel or ensure that appropriate district personnel are trained in testing procedures specific to each administration during the 2017 calendar year;
- \_\_\_\_\_ I understand my obligations concerning the security and confidentiality of these tests;
- \_\_\_\_\_ I am aware of the range of penalties that may result from a departure from the documented test administration procedures for the state assessments, and I am aware of the range of penalties that may result from a violation of test security and confidentiality; and
- \_\_\_\_\_ I am aware of my obligation to report any suspected violations of test security to the district superintendent and the Texas Education Agency.

I do hereby further certify, warrant, and affirm that I will faithfully and fully comply with all requirements concerning test security and confidentiality.

IN WITNESS WHEREOF I affix my hand on this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Signature of District Testing Coordinator

\_\_\_\_\_  
Printed Name of District Testing Coordinator

\_\_\_\_\_  
District Name

\_\_\_\_\_  
County-District Number

\_\_\_\_\_  
Area Code/Telephone #

Initial and sign the above portion before handling any secure test materials. After all testing for the 2017 calendar year for your district has been completed and all materials have been shipped to the testing contractor, sign and date the statement below.

I do hereby certify, warrant, and affirm that I have fully complied with all the requirements governing the student assessment program and that I have reported any suspected violations of test security or confidentiality to the Texas Education Agency.

\_\_\_\_\_  
Signature of District Testing Coordinator

\_\_\_\_\_  
Date

Sign this form after all testing for the 2017 calendar year has been completed and all materials have been returned to the testing contractor. Return this form as soon as possible, along with the signed superintendent/ chief administrative officer security oath, in the pre-addressed envelope provided in the district coordinator packet. The forms should be returned to Educational Testing Service, Attention: RESO Oaths, 200 Ludlow Drive, Ewing, NJ, 08638.

District testing coordinators need to sign only one oath for the 2017 calendar year.

**Duplicate this form as needed.**