

Provide the information requested below. Required fields are highlighted in yellow.

Note: Do not submit any student names, identification numbers, assessment data or other personally identifiable student information.

District:

County/District Number:

Contacts

Submitter (caller name)

First Name:

Last Name:

Title:

Phone: () - ext.

Email:

Superintendent/Chief Administrative Officer

First Name:

Last Name:

Title:

Phone:

Email:

STAAR Alternate 2 students assessed in Spring 2019

Primary disability category	Number of students assessed with STAAR Alternate 2
Auditory Impairment	<input style="width: 40px; height: 15px;" type="text" value="0"/>
Autism	<input style="width: 40px; height: 15px;" type="text" value="0"/>
Deaf-Blindness	<input style="width: 40px; height: 15px;" type="text" value="0"/>
Emotional Disturbance	<input style="width: 40px; height: 15px;" type="text" value="0"/>
Intellectual Disability	<input style="width: 40px; height: 15px;" type="text" value="0"/>
Multiple Disabilities	<input style="width: 40px; height: 15px;" type="text" value="0"/>
Orthopedic Impairment	<input style="width: 40px; height: 15px;" type="text" value="0"/>
Other Health Impairment	<input style="width: 40px; height: 15px;" type="text" value="0"/>
Specific Learning Disability	<input style="width: 40px; height: 15px;" type="text" value="0"/>
Speech Impairment	<input style="width: 40px; height: 15px;" type="text" value="0"/>
Traumatic Brain Injury	<input style="width: 40px; height: 15px;" type="text" value="0"/>
Visual Impairment	<input style="width: 40px; height: 15px;" type="text" value="0"/>

Explanation

Please complete 1 and 2 below. Do not provide personally identifying information about individual students.

1. Indicate how all members of the Admission, Review and Dismissal (ARD) committee have been trained on the participation requirements for assessment decisions for students with the most significant cognitive disabilities.

Select all that apply.

Training Method –	School Administration	Special Education Staff	Parents	Related Service Staff
Face-to-face training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Web-based resource	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Provided guidance documents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No training provided	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Other, please explain below.				

Describe the type of training that does not fit in the above chart. Do not include any personally identifying information in your description.

Character Count 0 (Max. 3000 characters)

EXAMPLE

2. Select the primary justification explaining why your district or charter school has more than 1.0 percent of its students participating in STAAR Alternate 2.

Complete all that apply.

a. The small district/charter school size results in a greater impact on participation rates (for example a district size of 180 students with 2 students with significant cognitive disabilities results in a higher than 1% participation rate).

Select total student enrollment that applies your district/charter school:

b. The district or charter school includes school, community, or health program(s) that draw large numbers of students with significant cognitive disabilities. Specify program(s).

Specify program(s): To select multiple documents, hold down the "Ctrl" key ("apple" key on Macs)

Group home, residential facility, children`s home, regional day school or state school
 Special medical or mental health facility for children with significant cognitive disabilities
 Social services for children with significant cognitive disabilities based on the location in proximity to surrounding rural areas
 Unique special education school-based program(s) that attracts families to the schools
 Military facility that includes children with significant cognitive disabilities as a part of the Exceptional Family Member program.
 Program other than those listed above:

Specify program name. Describe the type of training that does not fit in the above list.

Character Count 0 (Max. 3000 characters)

Do not include any personally identifying information in your description.

c. The ARD committee lacks the necessary knowledge to effectively use the participation requirements when defining a student as having a significant cognitive disability.

d. None of the situations above apply.
 List variables that may contribute to a high number of students in your district/charter school who participate in STAAR Alternate 2.

Character Count 0 (Max. 3000 characters)

Assurances

Please mark each box to indicate agreement with each statement.

- Your district or charter school implements clear and appropriate guidelines, consistent with the STAAR Alternate 2 [Participation Requirements](#), to use in determining when a student's significant cognitive disability justifies participation in this alternate assessment.
- Your district or charter school will address any disproportionality in the percentage of students in any subgroup taking STAAR Alternate 2.
- Parents are informed when their student will be assessed based on alternate achievement standards, including information about the implications of participation in STAAR Alternate 2.
- Students with the most significant cognitive disabilities are included, to the extent possible, in the general curriculum and assessments aligned with that curriculum.
- Your district or charter school disseminates information and promotes the use of appropriate accommodations to increase the number of students with the most significant cognitive disabilities who are tested against grade-level academic achievement standards.
- General and special education teachers and other appropriate staff are knowledgeable about the administration of assessments, including making appropriate use of accommodations for students with the most significant cognitive disabilities.