

## Spring 2015 NH Smarter Balanced Test Security/Confidentiality Agreement

I ACKNOWLEDGE THAT I WILL HAVE ACCESS TO THE Smarter Balanced Assessments for the purpose of administering the tests. I understand that these materials are highly secure, and it is my professional responsibility to protect their security as follows:

1. I will protect the contents of the test from any improper access.
2. I will handle test items or test booklets in accordance with security instructions. Copying or taking notes about any part of the test is not allowed.
3. I will carefully restrict access to the test materials to only persons authorized by the District Test Coordinator.
4. I will assure students' responses are accurate reflections of their own work.
5. I will assure that students' answers to test items are their own and that no one offers any improper assistance to students.
6. I acknowledge that discussing with teachers or students or answering any test questions contained in the assessment before, during, or after the administration of the test is a violation of test security.
7. I understand my username and password for the Smarter Balanced Assessments are secure and must remain confidential.
8. I acknowledge that copying or any other modification of the test booklet will result in an invalid test administration and no student scores will be reported.
9. I understand that any information about student data and test performance is confidential and I am not at liberty to discuss or share with anyone who does not have legal access to that information.
10. I acknowledge that I will report all instances of suspected test fraud, perpetrated either by students or adults, to the District Testing Coordinator and/or the Bureau of Assessment & Accountability at the New Hampshire State Department of Education.
11. I certify that students with disabilities and LEP students received appropriate accommodations in accordance with their IEP or 504 Plan. Scribes and those reading aloud to students and all individuals involved in transcriptions of student responses must also read and sign this *Test Security/Confidentiality Agreement*.
12. I certify that I have, prior to testing, read the Scribing Protocol for Smarter Balance Assessments and/or Guidelines for Read Aloud, Test Readers as applicable to my position.

Be sure to print, sign, and return the *Test Security/Confidentiality Agreement* to the District Test Coordinator before administering the Smarter Balanced Assessments.

Signed:

Date:

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Print Name:

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Position:

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School:

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District:

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