



Verification of District Training 2018-2019 School Year

WIDA™, ACCESS for ELLs® assessments: ACCESS for ELLs online, ACCESS for ELLs paper, Kindergarten ACCESS for ELLs and Alternate ACCESS for ELLs

This form must be filled out by the District Assessment Coordinator, signed by the District Superintendent, and submitted to the Assessment Unit as documentation that **all** district personnel who come in contact with the assessments before, during, and after the 2018-2019 ACCESS for ELLs administration have been trained.

Trainings must be comprehensive and interactive, and must include:

- District Determined Policies and Procedures
- Test Security
- Standardized Environment
- Test Administration
- Providing Student Testing Accommodations (as necessary)
- Test Administrator Role vs. Teacher Role
- An opportunity for questions/answers

This form certifies that within [District Name:] _____, the District Assessment Coordinator and **all** School Assessment Coordinators, Test Administrators, Test Examiners, and other appropriate district personnel (e.g., District Technology Coordinator, Sensitive Data personnel) have been trained in **all** aspects of the administration of the state’s assessments, including handling of materials, security, and ethical administration practices.

On the lines below, specify the dates that trainings were completed for all SACs, Test Administrators/Examiners, and Technology Coordinators in your district for the 2018-2019 ACCESS for ELLs assessments.

DAC training (attended CDE training, participated in live or recorded webinar) date: _____

SAC training completion date(s): _____

Test Administrator training completion date(s): _____

Technology Coordinator training completion date(s): _____

I have verified that district and school trainings took place on the dates as listed above, and that all individuals involved in the 2018 ACCESS for ELLs assessments have been trained.

Superintendent’s Name (print)

Date

Superintendent’s Signature

DAC’s Name (print)

Date

DAC’s Signature

This completed form must be saved electronically with a file name indicating the **district name, form name, and the date on which the document was saved** (e.g., District####ACCESSTrainingVerification12.15.18). The completed form must be loaded in the **WIDA** folder on **CDE Assessment Syncplicity** prior to beginning WIDA, ACCESS for ELLs assessment administration. Please notify Heather Villalobos Pavia via email (villalobospavia_h@cde.state.co.us) when the form is uploaded to Syncplicity.