Early Post-test Form

Please complete the following information. This form must be signed before administering an early post-test.
Just like test scores, this form must be uploaded into LACES no less than 1 week after test administration.

Program Name: _____   Date of Request: _____

Learner Name: _____   Enrollment Date: _____

NRS Pre-Test (Assessment, Form, Level): _____

Pre-test Scale Score & EFL: _____   Instructional Hours Completed: _____

Content Area: _____   Instructor: _____

Initial EFL Based on NRS Pre-Test:

☐ Beginning ABE Literacy 0-1.9   ☐ Beginning ESL Literacy 0-1

☐ Beginning ABE 2-3.9   ☐ Low Beginning ESL 2

☐ Low Intermediate ABE 4-5.9   ☐ High Beginning ESL 3

☐ High Intermediate ABE 6-8.9   ☐ Low Intermediate ESL 4

☐ Low ASE 9-10.9   ☐ High Intermediate ESL 5

☐ High ASE 11-12   ☐ Advanced ESL

Reason for Exception:

☐ The learner is exiting the program permanently.

☐ Evidence indicates the learner is ready to demonstrate a measurable gain.

Director Verification

Director Name: _____

By signing below, I verify that this learner meets the requirements for an early post-test.

Director Signature: _____   Date: _____