



THE SCHOOL DISTRICT OF
PALM BEACH COUNTY, FLORIDA

JEFF SILVERMAN
DIRECTOR

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ASSISTANT SUPERINTENDENT


EXCEPTIONAL STUDENT EDUCATION
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November 8, 2011
Bulletin #P-14078-CLS/ESE

Contact Person:
ESE: Janice Miller, PX 47561
504: Debra Neeson Okell, PX 48817
District Assessment Coordinator: Cherie Boone, PX 48855

Action by:
November 28, 2011

TO: All Principals

FROM: Judith Klinek, Chief Academic Officer 

SUBJECT: **WINTER 2011-2012 AND SPRING 2012 FCAT, FCAT 2.0, AND END-OF-COURSE (EOC) UNIQUE ACCOMMODATIONS REQUESTS**

Students with disabilities are eligible for unique accommodations that must be documented on their Individual Educational Plan (IEP) or 504 Plan(s) used for classroom instruction. The *Guide to FCAT and FCAT 2.0 Accommodations for Students with Disabilities* (www.fldoe.org/ease/pdf/fcatteam.pdf) has been provided to all ESE Contacts. This document includes a detailed description of unique accommodations which may only be used with special approval from the Commissioner of Education.

Unique accommodations are recommended by an IEP or 504 team and should be noted on the IEP or 504 Plan. One-item-per-page test documents will be available as a unique accommodation for Grades 3-5 and 7-9 FCAT 2.0 Reading; Grades 3-8 FCAT 2.0 Mathematics; Grades 5 and 8 FCAT 2.0 Science; and paper-based FCAT Reading Retake only.

Written requests for unique accommodations must be submitted on the attached FCAT Unique Accommodations Request Form along with a copy of the student's IEP or 504 Plan. Attachment A must be included for students with both visual and tactile disabilities.

Requests must be reviewed and signed by Jeff Silverman, Director, Exceptional Student Education (ESE), and Cherie Boone, District Assessment Coordinator. Requests with the appropriate documentation should be submitted to Janice Miller, Manager ESE, or Debra Neeson Okell, ADA/504 Specialist, FHESC, A-203 by November 28, 2011.

If there are any questions, please contact Janice Miller, Manager ESE, at PX 47561.

EWG:JK:JA:JS:JM:jb

Attachments

Approved: 
E. Wayne Gent, Superintendent

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**Winter 2011-2012 and Spring 2012
Unique Accommodations Request Form**

District Name: _____ District Number: _____

School Name: _____ School Number: _____

Student Name: _____ Student Grade Level: _____

Student Identification Number: _____

School Assessment Coordinator: _____

Subject Area(s): FCAT Writing FCAT 2.0 Reading FCAT 2.0 Mathematics FCAT 2.0 Science
 FCAT Reading Retake FCAT Mathematics Retake FCAT 2.0 Reading Retake
 Algebra 1 EOC Geometry EOC Biology 1 EOC

Unique Accommodation Requested (must be documented on the attached IEP or Section 504 plan):

One-Item-Per-Page Test Document

Available for Grades 3-5 and 7-9 FCAT 2.0 Reading; Grades 3-8 FCAT 2.0 Mathematics; Grades 5 and 8 FCAT 2.0 Science; and paper-based FCAT Reading Retake only

One-item-per-page may be indicated for, but is not limited to, the following accommodations; please mark one:

One Test Item Per Page Fewer Test Items Per Page Other _____
 Increased Space Between Test Items True Black and White

Attachment A: Request for Auditory Presentation of State Reading Assessments

Other (please specify unique accommodation other than one-item-per-page): _____

Does the student routinely receive the requested accommodation in classroom instruction? Yes No

Is the student receiving support/services through Exceptional Student Education? Yes No

Is the student receiving support/services through Section 504 of the Rehabilitation Act of 1973? Yes No

District ESE Director Signature (Required)

Date

District Assessment Coordinator Signature (Required)

Date

- A copy of the student's current IEP or Section 504 plan must accompany this form.
- The requested unique accommodation must be an allowable accommodation that is clearly documented in **both** classroom and testing accommodations sections of the IEP or Section 504 plan.

Please send all requests and documentation to:

Florida Department of Education
Bureau of K-12 Assessment
Attention: Tamika Brinson
325 West Gaines Street, Suite 414
Tallahassee, Florida 32399-0400
Fax: (850) 245-0771

For DOE Use Only:

Date Request Received: _____

Approved

Denied

Attachment A

REQUEST FOR AUDITORY PRESENTATION OF STATE READING ASSESSMENTS
(To accompany Unique Accommodations Request Form)

Student Name: _____ Student ID #: _____

School: _____ District: _____

Students who are eligible for auditory presentation of state reading assessments are those who cannot physically access any print materials (e.g., large print, braille) and have a need for reading assessments to be presented in a unique way. Students must meet both of the following eligibility requirements:

- The student must be severely visually disabled.
- The student must be without tactile or manual abilities.

A request for this unique accommodation may be made to the Commissioner of Education through the District Assessment Coordinator and ESE Director. The written request requires all of the following:

- a written description of the student's disabling condition, including the most recent medical eye examination
- medical documentation as evidence of severe tactile deficit or physical impairment that impedes tactile reading
- documentation of the most recently available re-evaluation or psychological reports
- a copy of the most recent student IEP or Section 504 plan
- a description of specific accommodations or modifications provided in the student's daily classroom instruction
- a description of the disability's effects on the student's access to any print materials (i.e., functional vision evaluation or learning media assessment)
- evidence that the student has had the opportunity to learn the skills being tested and has been prepared to participate in the testing program
- evidence that other allowable accommodations have been attempted and are not appropriate for the student
- evidence that the manifestation of the student's disabilities prohibits the student from responding to the test questions, even when the appropriate accommodations are provided, which demonstrates the student's impaired sensory or manual abilities rather than the student's achievement

The signed and completed Unique Accommodations Request Form and the documentation listed on this Attachment A must be mailed to Florida Department of Education, Bureau of K-12 Assessment, Attention: Tamika Brinson, 325 West Gaines Street, Suite 414, Tallahassee, FL 32399-0400, or faxed to (850) 245-0771.

On receipt of the request, the evidence will be reviewed and a recommendation will be made to the Commissioner of Education. The Commissioner of Education shall determine whether sufficient documentation has been provided and may request additional information. If the Commissioner of Education approves the recommendation, the FCAT / FCAT 2.0 Reading test may be read to the student by a test administrator.