

# TASC™ Test Administration Training



# WELCOME

JKL – 2018

# Today's Agenda

Overview of  
TASC Exam

Registration  
and  
Scheduling

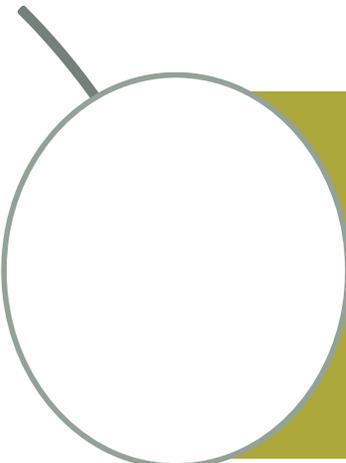
Giving the  
Exam

NYSED Policies  
and  
Procedures

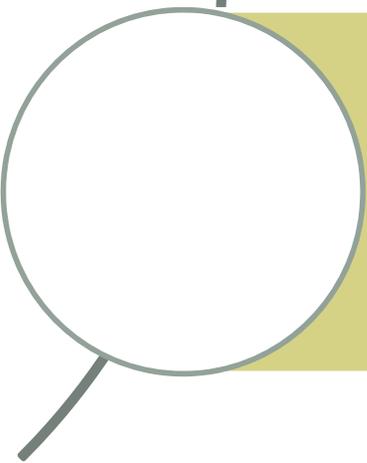
NYSED  
Paperwork  
and Follow-up

Open Q & A

## Overview of the TASC™ Test



On January 1, 2014 the Test Assessing Secondary Completion (TASC test) replaced the GED® as the primary pathway to earning a New York State High School Equivalency Diploma.



The TASC™ tests can be taken in either English or Spanish.

## Overview of the TASC™ Test



The TASC™ test can be taken via Paper-Based Test (PBT) or Computer-Based Test (CBT). An interactive Online Tools Training (OTT) is available to allow practice with the various CBT features.

Content areas of the test are:  
Mathematics, Reading, Science, Social Studies and Writing (includes an essay).

## Step 1

- The TASC™ test can be taken via Paper-Based Test (PBT) or Computer-Based Test (CBT). An interactive Online Tools Training (OTT) is available to allow practice with the various CBT features.

## Step 2

- Test center verifies applicant eligibility.

## Step 3

- Test center registers (one time only) and schedules all appropriate subtests for an applicant and mails the applicant an admission notice (PBT), or testing ticket (CBT).

## Step 4

- Test center verifies examinees identity on each day of test.

## Step 5

- Examinee takes all scheduled subtests (PBT or CBT).

## Step 6

- Test center electronically checks-in all examinees into the DRC/CTB Scheduling System.

### Step 7

- Test center mails completed test materials to NYSED and DRC/CTB within five (5) days of the last day of testing.

### Step 8

- DRC/CTB scores all test materials.

### Step 9

- DRC/CTB sends electronic scores to NYSED.

### Step 10

- NYSED processes records and sends out testing results transcripts to examinees.

# Registration & Scheduling Overview

- ▶ Examiners watch all DRC Training Webinars
- ▶ Testers submit application to test (Attachment A)
- ▶ Test Centers Register Testers on DRC's Website (always CHECK for return testers)
- ▶ Test Centers Schedule Testers on Selected Dates
- ▶ Ensure Each Tester Adheres to NYSED Policy<sup>8</sup>

## New York State Education Department Testing Policy Check All Requirements before Scheduling

1. Examinees must be New York State residents for at least thirty (30) days in order to take the TASC™ Test.
2. Examinees may take the TASC™ Test a maximum of three (3) times per calendar year (January 1 - December 31).
3. Examinees must wait a minimum of sixty (60) calendar days from the first day of testing in order to retest.
4. Examinees who are sixteen (16) or seventeen (17) years of age must reach “maximum compulsory school attendance age” by the first day of testing.

## New York State Education Department Testing Policy Check All Requirements before Scheduling

5. In addition to reaching “maximum compulsory school attendance age”, examinees who are sixteen (16) or seventeen (17) years of age by the first day of testing must meet additional age eligibility criteria.
6. Although examinees who are eighteen (18) years of age have already reached “maximum compulsory school attendance age”, they still need to meet age eligibility criteria.
7. All TASC™ testers will be assigned one (1) test form (J, K, or L) through the DRC/CTB Registration and Scheduling System.



# New York State Education Department Testing Policy

8. Examinees are not permitted to retest on the same test form during a calendar year.
9. Regardless of whether an examinee takes his or her first scheduled subtest on day one (1) or day two (2) or any subsequent day of a testing session, the test session must be recorded on the Attendance Sheet as the first day of testing. (Must use mm/dd/yyyy format).
10. Although not required, it is strongly suggested that all first-time TASC™ testers take the full battery (all 5 subtests).
11. An examinee must pass all five (5) subtests (Writing, Social Studies, Science, Reading and Mathematics) to earn a New York State High School Equivalency diploma. There is no total test score requirement for the TASC™ test.

## New York State Education Department Testing Policy

12. The minimum passing score for each TASC™ subtest is 500. To pass the Writing Subtest, examinees must earn both a score above 500 (from the multiple choice portion) and pass the Essay, during the same test session.

13. Passing English GED® (2002-2013) test scores of 410 or higher can be used towards earning a New York State High School Equivalency Diploma. These scores do not expire. Passing Spanish and French GED® (2004-2013) test scores of 410 or higher can be used towards earning a New York State High School Equivalency Diploma. These scores do not expire.

## New York State Education Department Testing Policy

14. Spanish and French testers who passed all five (5) GED® subtests received a New York State High School Equivalency Diploma with a Spanish or French designation written on the transcript. In order to receive a New York State High School Equivalency Diploma without the Spanish or French designation on the transcript, TASC examinees must pass TASC Reading and Writing subtests in English.

15. All subtests during each testing session must be administered within EIGHT (8) calendar days from the first day of testing.

\*For example, if the Math and Science were administered on February 15, 2017, Reading, Writing and Social Studies must be administered on or before February 22, 2017.

## Check-In Policy

- ❖ For paper-based testing, please note that the New York State Education Department requires check-in for each subtest to be completed by the close of business of the business day following administration of the subtest.

## Applicant's Steps in the Application and Testing Process

- Examinee takes each scheduled subtest and adheres to all rules and regulations of the testing center
- Examinee should expect results from NYSED within 6-8 weeks from the last day of testing



## Age Eligibility Requirements

### Maximum Compulsory School Attendance Age

- In New York State all applicants must have reached “maximum compulsory school attendance age” in order to take the TASC™ test

the  
age

# Age Eligibility Requirements (continued)

- ▶ Applicants reach “maximum compulsory school attendance age” when the school year in which they turn sixteen (16) years of age has ended (June 30). In New York City, and in a other public school districts throughout the State, applicants reach “maximum compulsory school attendance age” when the school year in which they turn seventeen (17) years of age has ended (June 30).
- ▶ Sixteen (16) and seventeen (17) year old’s who meet MCSAA must also meet other age eligibility criteria.

## Age Eligibility Requirements

- ❖ 16 & 17 year old's must have reached MCSAA and prove eligibility to test. Eligibility codes are to be written on the attendance sheet for all examinees under the age of 19.

### Eligibility Codes (EC) for sixteen (16) year olds

EC	EC Code Criteria	Required Proof of Eligibility
3	Enrolled in an Alternative High School Equivalency (ASHEP) Program. (Note: The second digit of the ASHEP Preparation Code to be provided on the Attendance Sheet must be a four (4) or higher).	T-TAF (send copy to NYSED)
4	Has applied to the United States Armed Forces.	D
5	Has applied to a college or post-secondary institution.	D
9	Has been home schooled in a school district approved program.	B

## Age Eligibility Requirements (continued)

Additional Eligibility Codes (EC) for seventeen (17) and eighteen (18) year-olds. The Eligibility Codes for 16 year-olds, found on the previous slide, are also applicable for 17 and 18 year-olds.

Required  
Proof of  
Eligibility

EC	Eligibility Code Criteria	Required Proof of Eligibility
0	Foreign born and never attended K-12 schools in the United States.	F
1	One (1) year has passed since the applicant was last enrolled in a program of study leading to a high school diploma.	B
2	Was a member of a high school class that has already graduated.	B

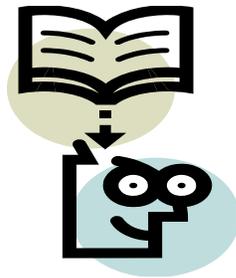
Age eligibility criteria for 17 and 18 year old's are continued on next page.

## Age Eligibility Requirements (continued)

Eligibility Codes (EC) for seventeen (17) and eighteen (18) year olds		Required Proof of Eligibility
E C	EC Code Criteria	
6	Currently enrolled in a Job Corps program.	D
7	Incarcerated or institutionalized.	E
8	Adjudicated youth or is under the direction of a prison, jail, detention center, court, parole or probation office.	E

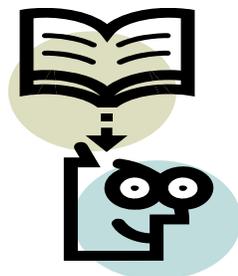
## Age Eligibility Review

- ❑ What age eligibility criteria does an applicant aged nineteen (19) or older by the first day of testing need to provide to the test center by the first day of testing?
- ❑ Are applicants who are age sixteen (16) by the first day of testing able to take the TASC™ test in New York State?



## Age Eligibility Review (continued)

- How long does a test center have to retain an applicant's age eligibility documentation in their testing files?
- Is NYSED able to successfully process a testing session record for a sixteen (16) year old who is enrolled in an ASHEP Program (EC 3) with the following Preparation Code?  
10351?.....15206? Why or Why not?



# NYSED Forms

## Application Forms

## Form Purpose

Staff Appointment Form

Application to become a TASC™ Coordinator or Examiner

THE STATE EDUCATION DEPARTMENT / THE UNIVERSITY OF THE STATE OF NEW YORK / ALBANY, NY 12234  
ADULT CAREER AND CONTINUING EDUCATION SERVICES (ACCES)  
ADULT EDUCATION PROGRAMS AND POLICY  
HIGH SCHOOL EQUIVALENCY OFFICE  
89 WASHINGTON AVE., ROOM 450 ESA  
ALBANY, NEW YORK 12224  
(518) 474-8906 FAX: (518) 474-3041  
<http://www.acces.nysed.gov>

**New York State Education Department  
High School Equivalency Office  
Official TASC™ Testing Center Staff Appointment Form**

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
mm dd yyyy

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Be authorized to serve as a (check one)  Test Coordinator  Examiner

at the following Official New York State TASC™ Testing Center:

Center Number: \_\_\_\_\_ Center Name: \_\_\_\_\_

Center Address: \_\_\_\_\_

Center City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email (required): \_\_\_\_\_

Phone Number: (\_\_\_\_) \_\_\_\_\_ Fax Number: (\_\_\_\_) \_\_\_\_\_  
Area Code Area Code

Reason for Request (check one):  Replacing current TASC™ Coordinator  
 New / Additional Examiner Staff

Required NYSED-training of the new staff member was completed on:  
TASC™ Training Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
mm dd yyyy

I understand that all TASC™ testing center staff must meet or exceed the educational and professional qualifications necessary to perform the duties as outlined in the Test Administration Manual (CTB), the New York State TASC™ Test Administration Handbook (NYSED), and the TASC™ Test Administration Guide for New York State (NYSED). Furthermore, I understand that the TASC™ testing staff may never be involved in any capacity in instruction or preparation of the examinees to take the TASC™ Test.

Appointee Signature: \_\_\_\_\_ Requested Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
mm dd yyyy

NYSED HSE Administrator Signature: \_\_\_\_\_ Approved Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
mm dd yyyy

1

# NYSED Forms

Application Forms	Form Purpose
Registration Form for NYSED TASC™ test administration training	Used by Coordinators and Examiners to register for the mandatory annual NYSED TASC™ Test administration training. This information will allow NYSED to update its test center contact database.

**Registration Form for NYSED JKL Training**

Registrant Name	
Test Center Name	
Affiliated Test Center Number(s)	
Affiliated Test Center Name(s)	
Registrant Phone Number	
Test Center Phone Number	
Registrant Email Address	
Fax Number	
Name of Person Replacing (If Applicable)	

**Role (Please Select One)**

New Coordinator:

New Examiner:

Existing Examiner:

Existing Coordinator:

Administrator:

Proctor or Clerical Staff:

(Administrators, proctors and clerical staff are not required to participate. Some may choose to attend if there is specific program need.)

Training Date (Select One):	
NYC at the Mid-Manhattan Adult Learning Center on December 13 <sup>th</sup> , 2017 from 10:00am-3:00pm:	<input type="checkbox"/>
Albany at the State Education Department on December 15, 2017, from 10:00am-3:00pm:	<input type="checkbox"/>
Webinar Session A, January 10 <sup>th</sup> 1-4pm:	<input type="checkbox"/>
Webinar Session B, January 16 <sup>th</sup> 9am-12noon:	<input type="checkbox"/>

All new and returning Examiners and Coordinators will also need to participate in DRC/TASC's webinar series when they become available for JKL. The webinar series will cover DRC's policies as well as a step by step instruction on registration, scheduling and test administration.



# NYSED Forms

Name	Age Eligibility Form Purpose
Attachment B Form	<p>A. One (1) year has passed since the applicant was last enrolled in a program of study leading to a high school diploma</p> <p>B. Applicant was a member of a high school class that has already graduated</p> <p>C. Applicant was home schooled.</p>

The University of the State of New York THE STATE EDUCATION DEPARTMENT High School Equivalency (HSE) Office (518) 474-5906		ATTACHMENT B		
<p>VERIFICATION FORM FOR NEW YORK STATE TASC™ APPLICANTS WHO ARE 17 OR 18 YEARS OF AGE AND HAVE NOT ATTENDED A REGULAR FULL-TIME HIGH SCHOOL PROGRAM FOR ONE YEAR OR MORE, WHOSE HIGH SCHOOL CLASS HAS ALREADY GRADUATED, OR FOR 16, 17 OR 18 YEARS OF AGE APPLICANTS WHO HAVE BEEN HOME SCHOOLED.</p> <p>Attachment B must be completed by an official of the school district last attended by the applicant.</p> <p><b>APPLICANT TYPES IN INFORMATION FOR THIS SECTION</b></p>				
To be Completed by Applicant	Fill in your name, Social Security Number or Government ID, age and date of birth. An official from the school you last attended <b>MUST</b> complete the section below. You must affix <i>Attachment B</i> to your completed and signed <i>Attachment A "Application for TASC™ Testing."</i>			
	Last Name	First Name	Middle Initial	
	Social Security Number or Government ID	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Age	Date of Birth mm / dd / yyyy
	Address	City	State	Zip Code
<p>*"Maximum compulsory school attendance age" is reached when the school year in which the student turned 16 (or older maximum age as the board of education of the school district may designate for required school attendance pursuant to section 320.5(3) of Education Law) has ended (June 30).</p> <p><b>SCHOOL OFFICIAL CLEARLY PRINTS THE INFORMATION CONTAINED IN THIS SECTION IN BLUE INK</b></p>				
To be Completed by School Official	Fill in your school's information below. Check and complete the statement that applies to the above examinee. Sign, date and provide your title, e-mail address and phone number. Affix school's official seal or stamp in the space provided. Only forms with original signatures in blue ink will be accepted.			
	School Name	Phone Number ( )		
	Address	City		
	E-Mail Address	State	Zip Code	
	<input type="checkbox"/> By signing below, I am verifying that the above named individual has reached "maximum compulsory school attendance age*" and ____/____/____ was the last day of attendance, dismissal or discharge and that he/she has not been a regularly enrolled student since that time, <b>OR</b>			
	<input type="checkbox"/> By signing below, I am verifying that the above named individual has reached "maximum compulsory school attendance age*" and did not complete requirements for graduation with the class of ____ (based on his or her ninth-grade enrollment) that will graduate or graduated on ____/____/____. <b>OR</b>			
<input type="checkbox"/> By signing below, I am verifying that the above named individual has reached "maximum compulsory school attendance age*" and has been home schooled				
Name of School Official (PLEASE PRINT)	<div style="border: 1px solid black; border-radius: 50%; width: 60px; height: 60px; display: flex; align-items: center; justify-content: center;">             Place Official Seal or Stamp           </div>			
Title of School Official			E-mail	
Signature of School Official			Date	
07/01/2016				

# NYSED Forms

Name	Age Eligibility Form Purpose
Attachment D	A. has applied to the US Armed Forces B. Has applied to a college or postsecondary institution C. Is currently enrolled in a Job Corps program.

The University of the State of New York  
 THE STATE EDUCATION DEPARTMENT  
 High School Equivalency (HSE) Office  
 (518) 474-5986

**ATTACHMENT D**

**VERIFICATION FORM FOR NEW YORK STATE TASC™ APPLICANTS 16\*, 17, OR 18 YEARS OF AGE WHO ARE CURRENTLY ENROLLED IN A JOB CORPS PROGRAM, HAVE APPLIED TO THE U.S. ARMED FORCES, OR HAVE APPLIED TO A COLLEGE, UNIVERSITY OR POST SECONDARY INSTITUTION**

**APPLICANT MUST COMPLETE ALL INFORMATION IN THIS SECTION**

To be Completed by Applicant	Fill in your name, Social Security Number or Other Government ID, age and date of birth. An official at the institution must complete one section below and affix its official seal or stamp. Attach this <b>Attachment D</b> to your completed and signed <b>Attachment A (Application for TASC™ Testing)</b> , and mail documents to the test center.				
	Last Name		First Name		Middle Initial
	Social Security Number or Government ID	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Age	Date of Birth mm / dd / yyyy	
	Street Address	City	State	Zip Code	

\* "Maximum compulsory school attendance age" is reached when the school year in which the student turned 16 (or older maximum age) as the board of education of the school district may designate for required school attendance pursuant to section 320.5(3) of Education Law has ended (June 30)\*.

**INSTITUTION OFFICIAL MUST COMPLETE ALL INFORMATION IN THIS SECTION IN BLUE INK**

To be Completed by Institution Official	<input type="checkbox"/> Student 17 or 18 years of age currently enrolled in a <b>Job Corps</b> program: By signing below, I am verifying that the above applicant has reached "maximum compulsory school attendance age**" and is currently enrolled in a Job Corps program and has demonstrated readiness to test.				
	<input type="checkbox"/> Student 16*, 17 or 18 years of age who has <b>APPLIED</b> to the <b>U.S. Armed Forces</b> : By signing below, I am verifying that the above applicant has reached "maximum compulsory school attendance age,**" has applied to the U.S. Armed Forces, and has met all requirements except for a high school diploma or high school equivalency diploma.				
	<input type="checkbox"/> Student 16*, 17 or 18 years of age who has applied to a <b>college, university</b> or an <b>accredited postsecondary institution</b> : By signing below, I am verifying that the above applicant has reached "maximum compulsory school attendance age,**" has applied to the below named institution, and has met all admission requirements except for a high school diploma or high school equivalency diploma.				
	Name of Official		Title		
	Name of Organization			Phone Number ( )	
	Street Address			Place Official Seal or Stamp Here	
	E-Mail Address				
City	State	Zip Code			
Official Signature					

# NYSED Forms

Name	Age Eligibility Form Purpose
Attachment E	Proof of incarceration or institutionalization, or for being an adjudicated youth, or under the jurisdiction of the court, parole or probation.

The University of the State of New York  
THE STATE EDUCATION DEPARTMENT  
High School Equivalency (HSE) Office  
(518) 474-5906

**ATTACHMENT E**

**VERIFICATION FORM FOR NEW YORK STATE TASC™ APPLICANTS 17 OR 18 YEARS OF AGE WHO ARE CONFINED TO A FACILITY OR INSTITUTION OR ARE ADJUDICATED YOUTH**

**NOTE:** These are residents who are confined to a narcotics addiction control center, a New York State Office of Children and Family Services (NYSOCFS) facility, a county jail, detention center or a New York State Department of Correctional and Community Supervision (NYSDOCCS) facility, are patients in a hospital in New York State OR youth who are adjudicated or under the direction of a prison, jail, detention center, court, parole or probation office.

**ALL SECTIONS TO BE COMPLETED BY FACILITY, INSTITUTION OR AGENCY IN BLUE INK**

<b>Program Information</b>	Name of Facility/Institution/Agency		Test Center Code	
	Address (Street/P.O. Box)			
	City	State	Zip Code	

<b>Applicant Information</b>	Fill in the name, Social Security Number, age and date of birth of the applicant. An official at the institution must complete all sections and affix its official seal or stamp. Attach this <i>Attachment-E</i> to the applicants completed and signed <i>Attachment A (Application for TASC™ Testing)</i> .			
	Last Name		First Name	Middle Initial
	Social Security Number or Government ID	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Age	Date of Birth mm / dd / yyyy
	Address	City	State	Zip Code

<b>Official Authorized Signature</b>	By signing below, I verify that the above named applicant has reached "maximum compulsory school attendance age**" and is confined to the above named facility or institution, or is an adjudicated youth under the direction of court, parole or probation. I also verify that the high school equivalency diploma is an essential part of the rehabilitation process and the applicant demonstrates readiness to test.	
	Type Name	E-mail
	Title	Phone Number
	Authorized Signature from Facility/Institution	Date

Place  
Official  
Seal or  
Stamp  
Here

03/23/2015

# NYSED Forms

Name	Age Eligibility Form Purpose
Attachment F	Proof that applicant is foreign born and never attended K-12 schools in the United States.

The University of the State of New York  
 THE STATE EDUCATION DEPARTMENT  
 High School Equivalency (HSE) Office  
 (518) 474-5906

**ATTACHMENT F**

**VERIFICATION FORM FOR NEWYORK STATE TASC™ APPLICANTS 17 OR 18 YEARS OF AGE WHO ARE FOREIGN BORN AND NEVER ATTENDED K-12 SCHOOLS IN THE UNITED STATES**

**NOTE:** This form is for New York State residents who are foreign born and have NEVER attended K-12 schools in the United States. It is required that the examinee's parent, guardian, sponsor or spouse fills out this form which must then be notarized. In addition, the examinee must provide a copy of a passport or visa which shows his/her initial date of arrival in the United States.

**PLEASE PRINT CLEARLY IN BLUE INK**

<b>Applicant Information</b>	Fill in your name, Social Security Number, age and date of birth. Attach this <i>Attachment-F</i> to your completed and signed <i>Attachment A (Application for TASC™ Testing)</i> .			
	Last Name		First Name	Middle Initial
	Social Security Number or Government ID	<input type="checkbox"/> Male <input type="checkbox"/> Female	Age	Date of Birth ____ / ____ / ____ mm    dd    yyyy
	Address		City	State      Zip Code

*Maximum compulsory school attendance age is reached when the school year in which the student turns 16, (or such older maximum age as the board of education of the school district may designate for required school attendance pursuant to section 3205(3) of Education Law) has ended (June 30)."*

<b>Witness Information</b>	To be completed by applicant's parent, guardian, sponsor or spouse		
	Last Name		First Name
	Relationship to Applicant or Title and Name of Sponsoring Agency		

**To Be Signed in Blue Ink by Applicant, Witness and Notary Public**

<b>Official Authorized Signatures</b>	By signing below, I verify that the above named applicant has reached "maximum compulsory school attendance age*" and has never attended K-12 schools in the United States.	
	Applicant Signature _____	Date _____
	Witness Signature _____	Date _____
	Notary Public Signature _____	Date _____



Place  
Official  
Seal or  
Stamp  
Here

# NYSED Forms

Name	Age Eligibility Form Purpose
T-TAF	Referral for testing from an official test preparation program to track their students for accountability - sent to NYSED with attendance sheets and signature cards. (For ASHEP programs, the second digit of preparation code, provided in the Attendance Sheet, must be four (4) or higher) Used by prep centers to 'claim' testers. Reported in NRS and reported on NYSED quarterly report.

The University of the State of New York  
THE STATE EDUCATION DEPARTMENT  
High School Equivalency (HSE) Office  
(518) 474-0906

**T-TAF FORM**

REFERRAL FORM FOR NEW YORK STATE TASC™ TEST APPLICANTS ENROLLED IN AN APPROVED ALTERNATIVE HIGH SCHOOL EQUIVALENCY PREPARATION (AHSEP) PROGRAM, AN ADULT PREPARATION PROGRAM OR A NON FUNDED NYSED CODED PROGRAM

**Prep Program Information** PLEASE PRINT CLEARLY IN BLUE INK

Name of TASC™ Preparation Program		5-Digit Prep Program Code
Address (Street/P.O. Box)		
City	State	Zip Code

**Applicant Information**

Last Name		First Name	Middle Initial
Address		Apartment Number	
Social Security Number	Age	Date of Birth	
□□□□-□□-□□□□		Month	Day Year

**TASC™ Readiness Assessment Information**  
Under Commissioner's Regulations 100.7 (1) (XVIII): "Students preparing to take the high school equivalency examination shall not be referred to that test unless they demonstrate readiness as indicated by tests approved by the Commissioner."

TASC™ Readiness Assessment Scores		Test Date _____
Mathematics _____	Reading _____	Science _____
Social Studies _____	Writing _____	Total _____

**Signature Section** *By signing below (in blue ink) I verify that the above applicant is being referred by any NYSED coded (AHSEP, adult or non-funded) preparation program. In addition, I verify that the applicant has reached "maximum compulsory school attendance age." Maximum compulsory school attendance age is reached when the school year in which the student has turned 16, or such older maximum age as the board of education of the school district may designate for required school attendance pursuant to section 3205(3) of Education Law has ended (June 30). It is my understanding that the applicant may not take the TASC™ Test until July 1<sup>st</sup> of the year in which he/she turned 16 or such older maximum age as referenced above. I also verify that the applicant demonstrates readiness to test as evidenced by scores on the TASC™ Readiness Assessment and/or observed academic performance.*

Signature of Preparation Program Official _____	Date _____
Print or Type Official's Name _____	
( ) _____	Required E-mail Address _____
Phone Number _____	

Place  
Official  
Seal or  
Stamp  
Here

# NYSED Forms

## Signature Cards

Ensure demographic and testing information is accurate and mark the booklet serial number to each subtest taken on the back of the card.

**PLEASE PRINT**

Test Center Name \_\_\_\_\_ Test Center Number

<b>N A M E</b> _____ (LAST) (FIRST) (MIDDLE)	<b>SOCIAL SECURITY NUMBER</b> - - - <small>Your Social Security Number will be used only to identify your test records and will not be given to anyone without your permission. It is not required to take the test.</small>		
	<b>A D R E S S</b> _____ (NUMBER) (STREET) (APT #) _____ (CITY) (STATE) (ZIP CODE)	TEST FORM _____ TASC™ ID _____	PAPER BASED TEST (PBT) <input type="checkbox"/> COMPUTER BASED TEST (CBT) <input type="checkbox"/>
DATE OF BIRTH _____ / /	AGE _____	TELEPHONE NUMBER _____ ( ) - _____	FIRST DATE OF TESTING _____ / /
HAVE YOU PREVIOUSLY TAKEN THE TASC™ TEST? ___ Y ___ N Date last tested ___ / ___ / ___	HAVE YOU PREVIOUSLY TAKEN THE GED® TEST? ___ Y ___ N Date last tested ___ / ___ / ___		

Understand that my eligibility for testing is determined based on the information provided on my application and in any other document. If any of that information was incorrect and I am declared ineligible, I understand that my test materials will not be scored.

HAVE READ AND UNDERSTAND THE STATEMENT PRINTED ABOVE \_\_\_\_\_ DATE \_\_\_\_\_  
 SIGNATURE IN PENCIL \_\_\_\_\_

### INSTRUCTIONS TO EXAMINEES

- Complete all items on the other side of this card. The testing center name and number will be posted in the testing room. The test form is found in the upper right hand section of the test book cover (below the words Test Book).
- Clearly print below serial numbers from all test books.

Mathematics \_\_\_\_\_  
 Reading \_\_\_\_\_  
 Writing \_\_\_\_\_  
 Science \_\_\_\_\_  
 Social Studies \_\_\_\_\_

A. Did you request testing accommodations? \_\_\_\_\_  
Y/N

B. Were your testing accommodations approved? \_\_\_\_\_  
Y/N

C. If YES, did you receive the testing accommodations? \_\_\_\_\_  
Y/N

D. If NO, did you sign the Accommodations Waiver Form? \_\_\_\_\_  
Y/N

SEPARATE EXAMINEE SIGNATURE  
 REQUIRED ON THE LAST  
 DAY OF TESTING \_\_\_\_\_ DATE \_\_\_\_\_  
SIGNATURE IN PENCIL

# NYSED Forms

## Attendance Sheet

Provides required information to NYSED to process test results. All required fields must be filled out accurately.

TASC™ ATTENDANCE SHEET (2016-17)				The New York State Education Department High School Equivalency Office 89 Washington Avenue, Room 460 EBA Albany, New York 12234									
Test Center Name		3-Digit Test Center #		1st Date of Testing									
Test Center Address				TASC™ Coordinator or Examiner – Type Name									
Number of Examinees Tested		English	Spanish	Total		TASC™ Coordinator or Examiner – Signature (In Blue Ink)							
Coordinator or Examiner Phone				Test Mode									
Coordinator or Examiner E-Mail				<input type="checkbox"/> CBT		<input type="checkbox"/> PBT							
Eligibility Codes (EC) for 16, 17 and 18 year olds (EC codes do not apply to anyone 19+ years old)							Age on 1 <sup>st</sup> Day of Test		Required Proof of Age Eligibility (Keep at Test Center)				
EC	Definition of EC Code						16	17	18				
0	Examinee is foreign born and never attended K-12 schools in the United States.								X	F			
1	Examinee has reached "maximum compulsory school attendance age" and one year has passed since the examinee was last enrolled in a program of study leading to a high school diploma.								X	B			
2	Examinee has reached "maximum compulsory school attendance age" and was a member of a high school class that has already graduated. (Age 17-NYC)						X	X	X	B			
3	The examinee has reached "maximum compulsory school attendance age" and is enrolled in an Alternative High School Equivalency Program (ASHEP). (Note: The second digit of the ASHEP Preparation Code to be provided on this sheet must be a four (4) or higher). (Age 17-NYC)						X	X	X	T-TAF (send copy to NYSED)			
4	The examinee has reached "maximum compulsory school attendance age" and has applied to the United States Armed Forces.						X	X	X	D			
5	The examinee has reached "maximum compulsory school attendance age" and has applied to a college or post-secondary institution.						X	X	X	D			
6	The examinee has reached "maximum compulsory school attendance age" and is currently enrolled in a Job Corps program.							X	X	D			
7	The examinee is incarcerated or institutionalized.							X		E			
8	The examinee is an adjudicated youth or is under the direction of a prison, jail, detention center, court, parole, or probation office.							X	X	E			
9	The examinee has reached "maximum compulsory school attendance age" and been home schooled. (Age 17-NYC)						X	X	X	B			
List of examinees taking the TASC™ test during this test session (2016). Alphabetize this list by last name of examinee.													
#	Last Name	First Name	9 Digit TASC ID (UID)	DOB (mm/dd/yyyy)	Test Form(s) Taken by Examinee (G, H or I)					Appendix H?	Age 16, 17 or 18 EC Code (0-9)	5-Digit Prep Code (if applicable)	T-TAF Enclosed
					Writing	Social Studies	Science	Reading	Math				
1													
2													
3													
4													
5													
6													
7													
8													
9													
10													
Coordinators or Examiners must send the following materials to NYSED within five (5) days of the last day of testing: Attendance Sheet, Signature Cards, T-TAF(S) (if applicable), Standard Vouchers, Accommodations Approval Letter(s) (if applicable), Accommodations Waiver Form(s) (if applicable), and Appendix H-Incident/Irregularity Report(s) (if applicable).													

# NYSED Forms

## Accommodations Waiver Form

Used when examinees wish to waive some DRC/CTB - approved testing accommodation

TASC™ TESTING ACCOMMODATIONS WAIVER FORM		
Examinee Legal Name :		
Test Center Code:	Test Center Name:	
TASC ID (UUID):	Test Date ____/____/____	<input type="checkbox"/> PBT <input type="checkbox"/> CBT
TASC™ Coordinator/Examiner Name:		
<p><b>I was Approved for the following Testing Accommodations:</b></p> <p>Extended Standard Testing Time</p> <p><input type="checkbox"/> 1.25 Times <input type="checkbox"/> 1.50 Times <input type="checkbox"/> 2.00 Times</p> <p><input type="checkbox"/> Other: _____ (Indicate)</p> <p><input type="checkbox"/> Audio CD of subtest</p> <p><input type="checkbox"/> Signed Essay or Video/Deaf and Hard of Hearing</p> <p><input type="checkbox"/> DVD of Signed Instructions</p> <p><input type="checkbox"/> Calculator</p> <p><input type="checkbox"/> Talking Calculator</p> <p><input type="checkbox"/> Scribe</p> <p><input type="checkbox"/> Private Room</p> <p><input type="checkbox"/> Supervised Breaks</p> <p><input type="checkbox"/> Instruction Interpreted</p> <p><input type="checkbox"/> Braille</p> <p><input type="checkbox"/> Small Group</p> <p><input type="checkbox"/> Screen Reader</p> <p><input type="checkbox"/> Preferential Seating</p> <p><input type="checkbox"/> Adaptive Equipment</p> <p><input type="checkbox"/> Adaptive Furniture</p> <p><input type="checkbox"/> Technology-Assisted Writing</p> <p><input type="checkbox"/> Assistive Device</p> <p><input type="checkbox"/> Other _____</p>		
<p><b>I am Declining the following Testing Accommodations:</b></p> <p>Extended Standard Testing Time</p> <p><input type="checkbox"/> 1.25 Times <input type="checkbox"/> 1.50 Times <input type="checkbox"/> 2.00 Times</p> <p><input type="checkbox"/> Other: _____ (Indicate)</p> <p><input type="checkbox"/> Audio CD of subtest</p> <p><input type="checkbox"/> Signed Essay or Video/Deaf and Hard of Hearing</p> <p><input type="checkbox"/> DVD of Signed Instructions</p> <p><input type="checkbox"/> Calculator</p> <p><input type="checkbox"/> Talking Calculator</p> <p><input type="checkbox"/> Scribe</p> <p><input type="checkbox"/> Private Room</p> <p><input type="checkbox"/> Supervised Breaks</p> <p><input type="checkbox"/> Instruction Interpreted</p> <p><input type="checkbox"/> Braille</p> <p><input type="checkbox"/> Small Group</p> <p><input type="checkbox"/> Screen Reader</p> <p><input type="checkbox"/> Preferential Seating</p> <p><input type="checkbox"/> Adaptive Equipment</p> <p><input type="checkbox"/> Adaptive Furniture</p> <p><input type="checkbox"/> Technology Assisted Writing</p> <p><input type="checkbox"/> Assistive Device</p> <p><input type="checkbox"/> Other _____</p>		
<p>Although I was approved for certain testing accommodations, I have declined those accommodations I have checked above.</p>		
Examinee Name (Print)	Signature of Examinee	Date
Parent or Guardian Name* (Print)	Signature or Parent, Guardian*	Date
*Applies only to examinees under age 18		
TASC™ Coordinator/Examiner Signature		Date
02/25/2015		

# NYSED Forms

## Supply Order Form

To order non secure testing supplies from NYSED



**THE STATE EDUCATION DEPARTMENT / THE UNIVERSITY OF THE STATE OF NEW YORK / ALBANY, NY 12234**  
 ADULT CAREER AND CONTINUING EDUCATION SERVICES (ACCES)  
 ADULT EDUCATION PROGRAMS AND POLICY  
 HIGH SCHOOL EQUIVALENCY (HSE) OFFICE  
 P. O. Box 7348  
 ALBANY, NEW YORK 12234  
 (518) 473-3859; FAX: (518) 474-3401  
<http://www.acces.nysed.gov/>

### TASC™ Supply Order Form

The TASC™ Coordinator or Examiner must complete this form and send it to the New York State Education Department to request supplies for TASC™ Test administration.

<b>Test Center Requester Information:</b>			
Coordinator or Examiner Name:		Telephone (    )	-
Test Center Number:	Test Center Name:		
	Street	State	Zip
Coordinator or Examiner E-mail Address:			
Today's Date:	Supplies Needed By:	Test Site Seating Capacity:	

Supplies Requested by the Test Center	Quantity Requested by the Test Center	Test Date
Signature Cards		
*Lined Colored Scratch Paper (Available in Yellow, Pink, Blue, Green)		
Pre-Paid UPS Mailers		
Talking Calculator**		/    /
UPS Shipping Envelopes (Plastic)		
Manila Test Session Envelopes		
Graph Paper		

\*Indicate which color scratch paper requested.

\*\*Talking Calculators must be returned to NYSED using the label and box provided within two (2) days after test administration.

Note: Additional TASC™ test books and answer booklets must be requested from DRC/CTB. T-TAF Forms may be found at:  
<http://www.acces.nysed.gov/hse/high-school-equivalency-hse-forms>

**Notes:**

**Fax the completed form to (518) 473-3859 at least two (2) weeks before the test date.**

# NYSED Forms

## County Code List

Used in the DRC/CTB Registration and Scheduling System

COUNTY CODE LIST			
CODE	COUNTY	CODE	COUNTY
001	ALBANY	035	RICHMOND
002	ALLEGANY	040	NIAGARA
003	BROOME	041	ONEIDA
004	CATTARAUGUS	042	ONONDAGA
005	CAYUGA	043	ONTARIO
006	CHAUTAUQUA	044	ORANGE
007	CHEMUNG	045	ORLEANS
008	CHENANGO	046	OSWEGO
009	CLINTON	047	OTSEGO
010	COLUMBIA	048	PUTNAM
011	CORTLAND	049	RENSSELAER
012	DELAWARE	050	ROCKLAND
013	DUTCHESS	051	ST. LAWRENCE
014	ERIE	052	SARATOGA
015	ESSEX	053	SCHENECTADY
016	FRANKLIN	054	SCHOHARIE
017	FULTON	055	SCHUYLER
018	GENESEE	056	SENECA
019	GREENE	057	STEUBEN
020	HAMILTON	058	SUFFOLK
021	HERKIMER	059	SULLIVAN
022	JEFFERSON	060	TIOGA
023	LEWIS	061	TOMPKINS
024	LIVINGSTON	062	ULSTER
025	MADISON	063	WARREN
026	MONROE	064	WASHINGTON
027	MONTGOMERY	065	WAYNE
028	NASSAU	066	WESTCHESTER
031	MANHATTAN	067	WYOMING
032	BRONX	068	YATES
033	BROOKLYN		
034	QUEENS		

# NYSED Forms

EC Codes (0-9)

Eligibility Code Checklist (0-9)

- What age eligibility criteria does an applicant aged nineteen (19) or older by the first day of testing need to provide to the test center by the first day of testing?
- Are applicants who are age sixteen (16) by the first day of testing able to take the TASC™ test in New York State?
- How long does a test center have to retain an applicant's age eligibility documentation in their testing files?
- Is NYSED able to successfully process a testing session record for a sixteen (16) year old who is enrolled in an ASHEP Program (EC 3) with the following Preparation Code? 10351?....15206? Why or Why not?

## Shipping Materials to DRC for Scoring

### ▶ **Within One Week After Testing:**

- Prepare answer documents for shipment to DRC for scoring
- Deadline for shipping answer documents is seven days, or earlier if required by the state

### ▶ **At the End of the Testing Cycle:**

- Return secure test materials to DRC at the end of the testing cycle

# NYSED Forms Common Errors

## NYSED Attendance Sheet

- Attendance Sheet is not complete
- Prep Codes are not included
- Age Eligibility Codes and forms are not included

## NYSED Signature Card

- First day of test session incorrect
- 3-digit test center code is missing
- Second Day of Testing - Not signed

# NYSED Forms & Supplies

- ▶ <http://www.acces.nysed.gov/hse/high-school-equivalency-hse-forms>
- ▶ Signature Cards
- ▶ Lined Colored Scratch Paper (Available in Yellow, Pink, Blue, Green)
- ▶ Pre-Paid UPS Mailers
- ▶ Talking Calculator
- ▶ UPS Shipping Envelopes (Plastic)
- ▶ Manila Test Session Envelopes
- ▶ Graph Paper

# Test Center Management

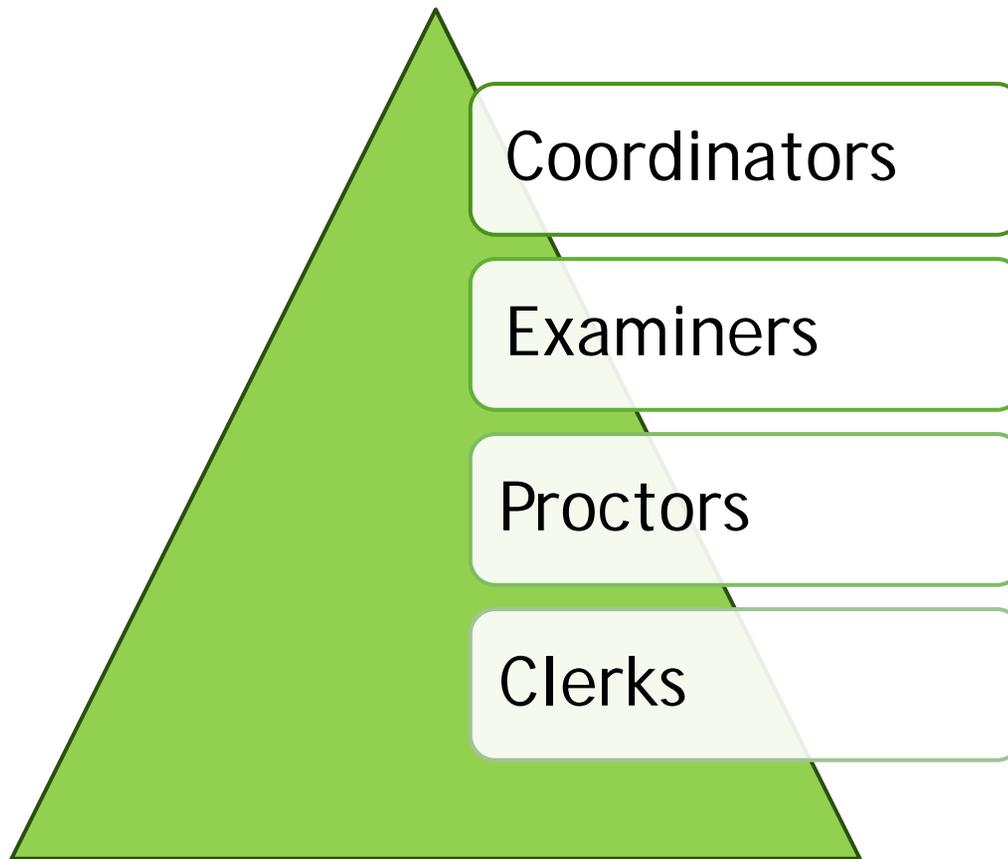
- ▶ Preparing the Testing Facility
- ▶ Admitting the Test Taker
- ▶ Proctoring During the Test
- ▶ Concluding the Test
- ▶ When to complete an Appendix H: Incident/Irregularity form

## Test Center Management Best Practices

- ▶ Test Center Management Activity: What Are Your Best Practices?
- ▶ Bathroom/breaks?
- ▶ Rules regarding late arrivals?
- ▶ Emergencies?
- ▶ When to complete an Appendix H: Incident/Irregularity form?



# Test Center Personnel and Roles



# Test Center Personnel and Roles

## Overarching Rules

All test centers must appoint one (1) TASC™ “Coordinator of Record”, although more than one person may serve as a coordinator in testing situations.

Avoid all circumstances that appear to be a conflict of interest.

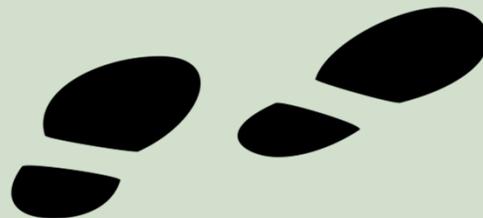
Avoid providing any unauthorized aid to examinees, and never tamper with subtest answer booklets for Paper-Based Testing (PBT) or online answers for Computer-Based Testing (CBT).

TASC™ Coordinators, Examiners, Proctors and Clerks may not administer the TASC™ Readiness Assessment, or take the TASC™ Test.

## Test Center Steps in the Application and Testing Process

On or before the first day of testing:

- Ensure registration and scheduling of all examinees has been completed; and
- Verify that a working clock is available in each testing room and that it can be seen by all examinees; and
- Verify that secure testing materials are locked up until needed; and
- Ensure there are adequate staff available to supervise the upcoming test session.



# Test Materials

Test Coordinator/Examiner Materials:	Examinee Materials:
1. Examiner's Manual Directions for Paper-Based Tests	1. Reusable Test Booklets (5 subject areas)
2. Test Administration Manual	2. Pre-assigned answer documents
3. Blank test booklet	3. Reference Sheets (Math – for Parts 1 and 2; Calculator – for Science and Math)
4. Administrative forms and supplies	4. Two sharpened No. 2 pencils with erasers
5. Blank answer document	5. Colored scratch paper (w/lines for Writing test) and graph paper, if requested
	6. Scientific calculator for the Mathematics (Part 1) and Science tests

## Test Center Steps in the Application and Testing Process: JKL Testing Times

Subtest	Calculator	English	Spanish
Writing (Essay and Multiple Choice)		110 minutes	110 minutes
Social Studies		75 minutes	75 minutes
Reading		85 minutes	85 minutes
Science	Yes	75 minutes	75 minutes
Mathematics Part 1 Part 2	Part 1 only*	55 minutes 50 minutes	55 minutes 50 minutes

\*Except as an approved accommodation, a calculator is used for Science and Mathematics (Part I only); therefore administering Science followed by Mathematics - Part 1 is recommended.

## Test Center Steps in the Application and Testing Process

12. Mail the following materials to NYSED within five (5) days from the last day of the testing session: (No exceptions).

- NYSED Attendance Sheet(s). (List examinees in alphabetical order by last name).
- Signature Cards (Alphabetize by last name of examinee).
- T-TAF's (if applicable) (Alphabetize by last name of examinee).
- Accommodation Approval Letter(s) (if applicable).
- Accommodation Waiver Form(s) (if applicable).
- Appendix H - Incident/Irregularity Form(s) (if applicable).

## Test Center Steps in the Application and Testing Process

13. Mail the following materials to DRC/CTB within five (5) days of the last day of the testing session: (No exceptions)

- Completed answer booklets (Alphabetize by last name of the examinee).
- Completed Group Information Sheet (GIS) which must be bundled with answer booklets.
- Accommodation Waiver Form(s) (if applicable).
- Appendix H Incident/Irregularity Form(s) (if applicable).

## TASC™ Testing Accommodations

- A test accommodation is defined as any modification or adjustment made to a test or the testing environment that will allow a student with a physical disability, emotional disability, or learning disability the opportunity to demonstrate his or her knowledge and skill in a testing situation.

## TASC™ Testing Accommodations

- Common modifications include: extending the amount of time an examinee is allowed to complete a test, use of a talking calculator, private room, assistive technology, braille print, supervised breaks, an audio CD of the test, having a scribe (someone else write down test answers), screen reader, and preferential seating.

## Rights of SWDs

- The right of students with disabilities to receive appropriate test access and testing accommodations is guaranteed by a number of federal and state laws and regulations which include: Individuals with Disabilities Education Act (IDEA) including the Individuals with Disabilities Education Improvement Act of 2004
- Parts 100 and 300 of the Code of Federal Regulations; Every Student Succeeds Act (ESSA); Section 504 of the Rehabilitation Act of 1973; and Americans with Disabilities Act (ADA) of 1990.

# TASC™ Testing Accommodations

Types of support available to TASC™ examinees with disabilities include:

1. Allowable Resources: No formal application and approval are required for their use.

\*Examples of Allowable Resources include: earplugs, and magnifiers, etc.

2. Alternate Formats: Only Braille and Large-Print require prior notification for test administrations.

3. Special Testing Accommodations: Requires a formal application and written approval from DRC/CTB prior to testing.

# TASC™ Testing Accommodations

Applicant and Test Center Steps in the Testing Accommodations Process:

Step 1 - The examinee and/or examinee's Advocate completes Section 1 of DRC's Special Testing Accommodations Request Form.

Step 2 - If the examinee has a valid IEP or 504 Plan (or private school equivalent), or if the examinee has proof of prior approval to use the requested accommodation(s), then the examinee can submit this documentation as an alternative to submission of an Evaluator's report.

Step 3 - The Evaluator completes Section 3 and provides supporting documentation in the form of an Evaluation Report.

Step 4 - The examinee provides the request form to the TASC Test Coordinator at the examinee's local testing center.

Step 5 - The TASC Test Coordinator and examinee review Sections 1 through 3 of the request form for completeness.

## TASC™ Testing Accommodations

Step 6 - When Sections 1 through 3 are deemed complete, the TASC Test Coordinator completes Section 4.

Step 7 - The examinee sends the request form and supporting documentation to the DRC | CTB TASC Test Accommodations Administrator for review.

Step 8 - The DRC | CTB TASC Test Accommodations Administrator reviews the request form, makes an approval decision, and mails the decision letter to the examinee and local testing center.

Step 9 - If the requested accommodations are approved, the examinee may schedule use of the accommodations during testing with the local testing center.

Step 10 - Examinees enclose a copy of his or her Accommodations Approval Letter with their Attachment A: Application for TASC™ Testing and send the materials to the selected test center for registration and/or scheduling.

## TASC™ Testing Accommodations

Step 11 - Examinees work with test center personnel to ensure that they will receive their approved accommodation(s) prior to scheduling a subtest.

Step 12 - The Test Coordinator works with test center personnel to ensure the needed supplies, testing environment adjustments, and test formats are available on all days of accommodated testing.

\*Only specifically approved testing accommodations are to be provided to an examinee.

## Waiving TASC™ Testing Accommodations

- If examinees over the age of eighteen (18) choose to waive one or more of their approved testing accommodations on the day of the test, they must complete and sign an Accommodations Waiver Form. Once the declined accommodations have been identified and the examinee signs the form, the test center does not need to provide the waived accommodation(s).

## Waiving TASC™ Testing Accommodations (continued)

- An applicant under the age of eighteen (18) may not waive their approved accommodations without parental consent, even if the applicant wishes to waive one or more of the testing accommodations (e.g. calculator) and signs the form. Testing centers must provide all approved accommodations for applicants under the age of eighteen (18) unless the applicant identifies the accommodation(s) he or she wishes to decline, signs the form, and the applicant's parent or guardian signs as well.

# What is the 4<sup>th</sup> Pathway?

- ▶ Passing scores from certain Regents Exam taken in high school may be used in lieu of corresponding TASC Subtests for obtainment of an HSE diploma.
- ▶ Implementation is slated to begin in Feb. 2018.
- ▶ All applications who wish to use Regents Exams passing scores in place of a TASC Subtest, must submit an official application (Attachment R) to NYSED. A transcript will be issued.

## How will the Fourth Pathway affect TASC test administration?

- ▶ Test Centers, Administrators, Coordinators and Examiners are not expected to interpret high school transcripts.
- ▶ This program will increase the number partial testers. It is the tester's responsibility to select their subtests and work with NYSED to understand testing requirements.
- ▶ Examinees that have not applied for and received official notification of HSE credit for Regents exams, should be encouraged to take all five TASC subtests.

# NYSED Contact & Information

HSE Hotline: 518-474-5906  
& HSE Email: [hse@nysed.gov](mailto:hse@nysed.gov)

- ▶ Used for Students Looking for Scores (After a minimum of 6 Weeks)
- ▶ General Information
- ▶ Use as a general contact for all SED staff.

## HSE Website

- ▶ <http://www.access.nysed.gov/what-hsetasc-test>
- ▶ General Information on The TASC Exam
- ▶ Directions for Registration
- ▶ Status Verification
- ▶ Copies of Diplomas & Transcripts
- ▶ Prep Program information

# TASC Customer Support

Website:

▶ [www.tasctest.com](http://www.tasctest.com)

DRC TASC Test Customer Support (TASC Test Help Desk)

- Phone: 1-888-282-0589
- Email: [TASCTestHelpdesk@Datarecognitioncorp.com](mailto:TASCTestHelpdesk@Datarecognitioncorp.com)
- Representatives are available 7:00 AM to 8:00 PM, Eastern Time, Monday – Saturday