

## 2017-18 Alternate Assessment Justification

The following must be completed by districts contributing to the state exceeding the 1% cap for students participating in the alternate assessment. Please return the completed form to [Leslie.M.Hoffman@tn.gov](mailto:Leslie.M.Hoffman@tn.gov) by Monday, Feb. 11, 2019, by 5 p.m. CT.

### District Name: Sequatchie County Schools

	% of Alternative Assessments: 2016-2017 Administration	Current % of Alternate Assessments: 2017-2018 Administration	Projected % of Alternate Assessments: 2018-2019 Administration
MSAA ELA	0.96%	2.03%	
MSAA Math	0.96%	1.93%	

1. **Percentage Goal:** What is your goal in addressing decision making for identifying the right students for the alternate assessment?

To ensure that we are properly identifying students who fit appropriately with the alternative assessment.

2. **Process:** Describe the process, training, and steps the district will use to meet the percentage goal reduction proposed above.

Currently we assess students using adaptive skills testing, academic testing, and IEP team member input to assess whether it is appropriate for the student to be tested on the alternative assessment.

3. **Disproportionality:** Explain how the school district is addressing any disproportionality identified in areas that include, but are not limited to: student's IEP disability, number of students with disability, grade bands (elementary, middle, high school).

We will look at our procedures and ensure that we are still following protocol on appropriate identification and eligibility for the alternative assessment. We follow policy and procedure rather than looking at specific numbers of students to create a cap.

4. **Parent Participation:** How do parents participate in, or how are they notified of, the IEP decision for their student to participate in the alternate assessment(s)?

Parents are informed through the process of parent input to determine if this type of testing is appropriate for the student. They also have to sign a form that explains to them that their student will be participating in the alternative assessment and the implication of taking this pathway.

5. **Support Requested:** Please detail any support needed from the department. (All feasible requests for supports will be considered.)