



Miami-Dade County Public Schools Monitoring Form For Use in Paper-Based Test (PBT) Administrations

School Name _____ School # _____

Assessment Program _____ Test Subject _____ Room # _____

Number of Students _____ Number of Proctors _____

Please check your response to each of the following questions based on your observations and information provided by the School Assessment Coordinator and/or Test Administrator. Ask to see any documentation referred to below.

| | | Yes | No | Not Observed | N/A |
|-----|--|--------------------------|--------------------------|--------------------------|--------------------------|
| 1. | Were materials being stored in a secured (locked) limited access location? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. | Was there an organized plan for distributing materials to test administrators on the day of testing? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. | Was documentation available to show how the school accounted for the assignments of materials to the test administrators? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. | Was the testing environment reasonably secured (security logs for monitors maintained, lack of visual cues, and electronic devices turned off and not within arm's reach)? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. | Was the testing environment reasonably controlled (lighting, temperature, and seating)? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. | Were testing signs (Do Not Disturb, Session Signs, and Electronic Devices) posted and visible at all entrances? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. | Were materials distributed to and collected from students on a one-at-a-time basis? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. | Was a seating chart used to record seating assignments? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. | Was the adult-to-student ration 1 to 25 or less? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. | Was the testing environment as free from disturbance as possible during testing (bells were not rung and access to the intercom was limited to emergencies)? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. | Did the test administrator and/or proctor(s) circulate around the room while the students were working to ensure they were working on the right section of the test? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. | Did the test administrator read the directions for administering the test exactly as given in the test administrator's manual? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. | Were time limits strictly enforced? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. | Were test materials secured immediately after testing? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Comments: Please explain any deviations from test security guidelines and procedures or any occurrences that may have seemed unusual.

_____ Print Monitor's Name _____ Monitor's Signature _____ Date