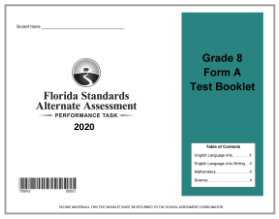
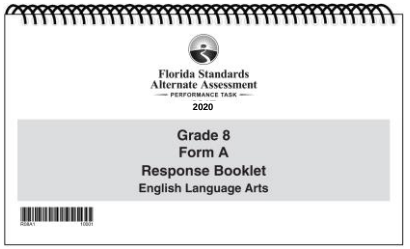
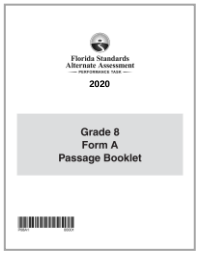


Florida Standards Alternate Assessment
PERFORMANCE TASK
2020





DISTRICT: _____ **SCHOOL:** _____

Booklet Security Checklist

STUDENT NAME	FORM TYPE *A-C*	GRADE *3-8* ***or*** CONTENT AREA *e.g., ELA 1, ALGEBRA, CIVICS*	TEST BOOKLET SECURITY # *Last 5 digits of barcode*	AUXILIARY KIT SECURITY # *Last 5 digits of barcode*	CHECK APPLICABLE AUXILIARY BOOKLET(S)					**MATERIALS RECEIVED** TEST ADMINISTRATOR SIGNATURE & DATE	**MATERIALS RETURNED** SCHOOL COORDINATOR SIGNATURE & DATE
					PASSAGE	RESPONSE					
						ELA	MATH	SCIENCE	SOCIAL STUDIES		

PHOTOCOPY AS NEEDED

Use this checklist to keep track of secure test materials.