

ELL Assessment Accommodations Plan

Student Information

Name: _____

Date of Assessment: _____

Name of Assessment: _____

Case Information

ELL Teacher: _____

School Year: _____

Building/School: _____

General Education Teacher(s): _____

Accommodations that the student needs for this assessment and date arranged (not all accommodations are allowable for all assessments).

Accommodations for Instruction and Assessment NDAC § 67-28-01-05(2)(f)			
<input type="checkbox"/>	Administer test in small group	<input type="checkbox"/>	No True/False questions
<input type="checkbox"/>	Modify linguistic complexity	<input type="checkbox"/>	Correlate study guides directly with test
<input type="checkbox"/>	Simplify test directions	<input type="checkbox"/>	Simplify vocabulary syntax
<input type="checkbox"/>	Use word bank chunks with 5 words or less (all words used only once)	<input type="checkbox"/>	All tests and quizzes read aloud to student
<input type="checkbox"/>	Allow extra time	<input type="checkbox"/>	Add visual support
<input type="checkbox"/>	No "none of the following except" questions	<input type="checkbox"/>	Give only 3 options on multiple choice
<input type="checkbox"/>	Write answers directly on test	<input type="checkbox"/>	Word to word bilingual dictionary
<input type="checkbox"/>	Read aloud verbatim test directions, questions and answer choices	<input type="checkbox"/>	Other

Accommodations authorized by:

Signed

Signed