

APPENDIX B

PREASSESSMENT VISIT MATERIALS

B

Appendix B. Preassessment Visit Materials

Administration Schedules

The NAEP Administration Schedule (shown below) is the form used throughout the three stages of the NAEP process: preassessment, assessment, and postassessment. It is the only document that links students selected for the NAEP sample to their demographic data and their performance on the assessment.

There are two other Administration Schedules in 2009: The Extended Student Background Questionnaire (ESBQ) (shown on page B.2) and the National Indian Education Study (NIES) versions are used to link student data to the regular NAEP assessment. The Administration Schedule for the NIES is described and shown in Appendix D.

This form must be completed in No. 2 pencil.

Demographics

1 = White, not Hispanic
2 = Black, not Hispanic
3 = Hispanic
4 = American Indian/Alaska Native
5 = Other
6 = Information unavailable

For Use in Column "G"

National School Lunch Program
1 = Student not eligible
2 = Free lunch
3 = Reduced-price lunch
4 = School not participating
5 = School refused
6 = Information unavailable

For Use in Column "H"

Students with Disabilities (SD)
1 = Yes, SD
2 = Yes, IED
3 = Yes, IEP/504 plan in process
4 = No, not SD
5 = Information unavailable

For Use in Column "I" After "J"

Personnel Use Only

English Language Learner (ELL)
1 = Yes, ELL
2 = No, not ELL
3 = Formerly ELL (credited for JVP reporting)

Information unavailable
For Use in Column "K" After "L"

Planning Code
1 = Assess without accommodation(s)
2 = Accommodation(s) offered in regular session
3 = Accommodation(s) offered in separate session
4 = Not applicable

For Use in Column "M"

Session Number
RS0803

School #: 992-122-0 Grade: 8

School Name: Dixon Middle School

Original session scheduled for: Day/Date: _____ Time: _____ Location: _____

Makeup session scheduled for: Day/Date: _____ Time: _____ Location: _____

Makeup Held: Held Not Held

Session Number: RS0803

Original Sample: 26

Total in Sample: _____

To Be Assessed: _____

Total Assessed: _____

Admin. C/A	"B"	"C"	"D"	"E"	"F"	"G"	"H"	"I"	"J"	"K"	"L"	"M"	"N"	"O"	"P"	"Q"	"R"
Student Name	Personnel Use Only	Line #	Month	Year	ELL	SD	Original Booklet ID #	Accommodation Booklet ID #	Admin. Code	Administration Codes							
01 Peters, Mark	232	R	0	4	9	5	1	1	1	4		2	2	401 193489 7		01	ABSENT IN ORIGINAL
02 Phillips, Susan	232	MC	0	2	9	5	2	3	1	1		2	2	101 023578 1		02	ABSENT IN ORIGINAL
03 Pierce, Tim	232	S	0	6	9	4	1	1	2	4		2	2	201 993461 4		03	ABSENT IN MAKEUP
04 Price, Carol	232	R	1	0	9	4	2	1	1	4		2	2	501 110376 0		04	ABSENT IN ORIGINAL
05 Putnam, April	232	MC	1	1	9	4	2	2	1	1		2	2	102 910456 2		05	ABSENT IN ORIGINAL
06 Qualls, Kimberly	232	S	0	9	9	4	2	5	1	4		2	2	202 103478 2		06	ABSENT IN ORIGINAL
07 Ramos, Marisol	232	R	0	1	9	5	2	3	3	4		1	2	001 004051 9		07	ABSENT IN ORIGINAL
08 Randal, Tyrone	232	MC	0	5	9	5	1	2	1	4		2	2	103 803987 0		08	ABSENT IN ORIGINAL
09 Reed, Julia	232	S	0	7	9	4	2	2	1	4		2	2	203 267931 5		09	ABSENT IN ORIGINAL
10 Reynolds, Michael	232	R	0	9	9	4	1	1	1	2		2	2	402 245796 4		10	ABSENT IN ORIGINAL
11 Rivera, Pedro	232	M	1	2	9	4	1	3	2	4		1	2	104 723467 1		11	ABSENT IN ORIGINAL
12 Robins, Sang	232	S	1	0	9	4	1	4	1	4		1	2	204 101456 6		12	ABSENT IN ORIGINAL
13 Rogers, Daniel	232	R	0	6	9	5	1	5	1	1		2	2	502 322019 0		13	ABSENT IN ORIGINAL
14 Rowe, Christina	232	M	0	2	9	5	2	1	1	1		2	2	105 005061 3		14	ABSENT IN ORIGINAL
15 Sanders, Tina	178	S	1	0	9	4	2	5	1	4		2	2	205 123579 1		15	ABSENT IN ORIGINAL

The ESBQ Administration Schedule (shown below) is only used for the schools sampled for the ESBQ. The ESBQ Administration Schedule does not replace the Administration Schedule for NAEP assessment; instead, it is used in conjunction with the Administration Schedule. If an ESBQ session is administered in one of your schools, you are responsible for completing two Administration Schedules: one for NAEP and one for the ESBQ.

The ESBQ Administration Schedule will be preprinted with student information in the Student Name, NAEP Session #/ Line #, and Original Student Booklet ID # columns.

ESBQ Administration Schedule



ESBQ 2009 Administration Schedule

This form must be completed in No. 2 pencil.

School #: 992-122-0	Grade: 8	Original session scheduled for: Day/Date: _____ Time: _____ Location: _____	Makeup session scheduled for: Day/Date: _____ Time: _____ Location: _____	If Makeup Needed: Makeup Held <input type="checkbox"/> Makeup Not Held <input type="checkbox"/>
School Name: Dixon Middle School		Administrator's Name: _____		
# Original Sample: .26		# Absent (Admin. Codes 40-46, 47-49): _____		
# Excluded Non-Students: _____		# Assessed (Other Sessions): _____		
Total in Sample: _____		TOTAL ASSESSED: _____		

Attn. (V/A)	ESBQ Student Questionnaire	NAEP Session #/Line #	Original Student Booklet ID # (Column "O" on Admin. Schedule)	ESBQ Student Questionnaire ID # (Barcode ID # on SD or ESBQ Cover)	ESBQ Admin. Code	ESBQ Administration Codes
01	Peters, Mark	RS0903 01	401 193489 7	97-		ASSESSED IN ORIGINAL 10 = In session full time 11 = No responses in booklet 12 = In session part time 13 = Session incomplete 14 = Other, specify on cover ASSESSED IN MAKEUP 20 = In session full time 21 = No responses in booklet 22 = In session part time 23 = Session incomplete 24 = Other, specify on cover ABSENT 40 = Temporary 41 = Long-term 42 = Chronic injury 43 = Suspended 44 = In school, did not attend 45 = Accommodation scheduling problem 46 = Parent refusal 47 = Student refusal 48 = Other, specify on cover 49 = Session/subject refused by school OTHER 51 = Withdrawn/Graduated 52 = Unassigned book (omitted) 54 = Ineligible, never attends campus 55 = Ineligible, other 56 = Not in sample REASONS FOR EXCLUSION 60 = SD - Cannot be assessed 61 = SD - Required accom. not permitted 62 = ELL - Cannot be assessed 63 = ELL - Required accom. not permitted 64 = SD & ELL - Cannot be assessed 65 = SD & ELL - Required accom. not permitted 66 = Excluded but assessed 67 = SD - Required accom. not available 68 = ELL - Required accom. not available 69 = SD & ELL - Required accom. not available
02	Phillips, Susan	RS0903 02	101 023578 1	97-		
03	Pierce, Tim	RS0903 03	201 993461 4	97-		
04	Price, Carol	RS0903 04	501 110376 0	97-		
05	Putnam, April	RS0903 05	102 910456 2	97-		
06	Qualls, Kimberly	RS0903 06	202 103478 2	97-		
07	Ramos, Marisol	RS0903 07	001 004051 9	97-		
08	Randal, Tyrone	RS0903 08	103 803987 0	97-		
09	Reed, Julia	RS0903 09	203 267931 5	97-		
10	Reynolds, Michael	RS0903 10	402 245796 4	97-		
11	Rivers, Pedro	RS0903 11	104 723467 1	97-		
12	Robins, Sang	RS0903 12	204 101456 6	97-		
13	Rogers, Daniel	RS0903 13	502 322019 0	97-		
14	Rowe, Christina	RS0903 14	105 005061 3	97-		

The School Folder

The School Folder (shown below) contains the most critical set of documents in the assessment process. There are three versions of the School Folder—one for each grade. For easy identification, grade 4 folders are bright green, grade 8 folders are bright yellow, and grade 12 folders are bright blue. Detailed information about the School Folder is provided in chapter 1.

12th GRADE NAEP 2009 SCHOOL FOLDER 12th GRADE

PLACE LABEL HERE
 TERRITORY: _____ REGION: _____ AREA: _____
 ASSESSMENT DATE: _____
 SCHOOL TYPE (circle one): PUBLIC NONPUBLIC
 SCHOOL NAME: _____
 SCHOOL ID#: _____
 ADDRESS: _____
 PRINCIPAL: _____
 SCHOOL COORDINATOR: _____
 PHONE: _____
 FAX: _____
 E-MAIL: _____
 SESSION NUMBERS: _____
 COMMENTS: _____

SUPERVISOR: Complete the following information before sending to AC:
 SPECIAL STUDIES (circle all that apply): HSTS ESBQ NONE
 ASSESSMENT COORDINATOR: _____
 SUPERVISOR: _____
 STUDENT LIST TYPE (circle one): E-FILE FAXMAIL COLLECTED BY NSC

Qty.	QUESTIONNAIRES REQUIRED FOR THIS SCHOOL
1	SCHOOL Grade 12
_____	SD Questionnaire
_____	ELL Questionnaire

8th GRADE NAEP 2009 SCHOOL FOLDER 8th GRADE

PLACE LABEL HERE
 TERRITORY: _____ REGION: _____ AREA: _____
 ASSESSMENT DATE: _____
 SCHOOL TYPE (circle one): PUBLIC NONPUBLIC
 SCHOOL NAME: _____
 SCHOOL ID#: _____
 ADDRESS: _____
 PRINCIPAL: _____
 SCHOOL COORDINATOR: _____
 PHONE: _____
 FAX: _____
 E-MAIL: _____
 SESSION NUMBERS: _____
 COMMENTS: _____

SUPERVISOR: Complete the following information before sending to AC:
 SPECIAL STUDIES (circle all that apply): NIES ESBQ NONE
 ASSESSMENT COORDINATOR: _____
 SUPERVISOR: _____
 STUDENT LIST TYPE (circle one): E-FILE FAXMAIL COLLECTED BY NSC

Qty.	QUESTIONNAIRES REQUIRED FOR THIS SCHOOL
1	SCHOOL Grade 8
_____	SD Questionnaire
_____	ELL Questionnaire
_____	READING TEACHER Grade 8
_____	MATHEMATICS TEACHER Grade 8
_____	SCIENCE TEACHER Grade 8

4th GRADE NAEP 2009 SCHOOL FOLDER 4th GRADE

PLACE LABEL HERE
 TERRITORY: _____ REGION: _____ AREA: _____
 ASSESSMENT DATE: _____
 SCHOOL TYPE (circle one): PUBLIC NONPUBLIC
 SCHOOL NAME: _____
 SCHOOL ID#: _____
 ADDRESS: _____
 PRINCIPAL: _____
 SCHOOL COORDINATOR: _____
 PHONE: _____
 FAX: _____
 E-MAIL: _____
 SESSION NUMBERS: _____
 COMMENTS: _____

SUPERVISOR: Complete the following information before sending to AC:
 SPECIAL STUDIES (circle all that apply): NIES ESBQ NONE
 ASSESSMENT COORDINATOR: _____
 SUPERVISOR: _____
 STUDENT LIST TYPE (circle one): E-FILE FAXMAIL COLLECTED BY NSC

Qty.	QUESTIONNAIRES REQUIRED FOR THIS SCHOOL
1	SCHOOL Grade 4
_____	SD Questionnaire
_____	ELL Questionnaire
_____	TEACHER Grade 4
_____	NIES SCHOOL Grade 4 (if NIES to be administered)
_____	NIES TEACHER Grade 4 (if NIES to be administered)

AC: Complete this information before sending to supervisor:
 PREASSESSMENT DATE: _____ TIME: _____
 MAKEUP REQUIRED (circle one): YES NO REFUSED DATE: _____
 NUMBER OF REGULAR SESSIONS: _____
 NUMBER OF SEPARATE ACCOMMODATION SESSIONS: _____
 NUMBER OF AAa: _____

SHIPMENT TRACKING ON BACK OF FOLDER

School Folder Transmittal Form

Insert or staple a School Folder Transmittal Form (shown below) inside every School Folder. Your supervisor will initial the contents of the School Folder before he/she passes it on to you. At the end of the assessment, when you are ready to ship the folder back to your supervisor, initial the folder contents in the AC to Supervisor column. When your field manager receives the folder, he/she will check to be sure all rows have been initialed or have a comment to ensure that all steps have been completed.

School Folder Transmittal Form – NAEP 2009

School Name: _____ ID #: _____

INSTRUCTIONS TO SUPERVISORS AND ACS: Initial in the appropriate column to indicate the documents you are including in the School Folder.				
DOCUMENT	SUPERVISOR TO AC	AC TO SUPERVISOR	SUPERVISOR TO FM	COMMENTS/NOTES
Private School Folder	(if applicable)	(if applicable)	(if applicable)	
Field Sampling Line Numbers Form	(if applicable)	(if applicable)	(if applicable)	
New Enrollee Sampling Line Numbers Form	Printout	Printout	Printout	
New Enrollee Listing Form	Blank	N/A	N/A	
Original List of Students Submitted for Sampling	Original	N/A	N/A	
SD/ELL Roster of Questionnaires	(if applicable) Original, Grades 4/8	(if applicable) Photocopy, without names	(if applicable) Photocopy, without names	
Grade 12 Roster of Questionnaires	Original	Photocopy, without names	Photocopy, without names	
Preassessment Packet FedEx Airbill	Receipt	Receipt	Receipt	
White name labels for student certificates	Grades 8/12	N/A	N/A	
Quality Control Booklet	N/A	Completed	Completed	
Administration Schedule	Original	Photocopy, without names	Photocopy, without names	
Inclusion Worksheet	(if applicable) Preprinted	(if applicable) Photocopy, Without names	(if applicable) Photocopy, Without names	
SD/ELL Online Questionnaire Summary	N/A	(if applicable) Printout	(if applicable) Printout	
Student Sampling Summary Report	(if applicable)	(if applicable)	(if applicable)	
If ESBQ, ESBQ Administration Schedule	Original	Photocopy, without names	Photocopy, without names	
If NIES, NIES Administration Schedule	Original	Photocopy, without names	Photocopy, without names	
If NIES, NIES Roster of Questionnaires	Original	Photocopy, without names	Photocopy, without names	
If NIES, NIES School Questionnaire	Original	N/A	N/A	
If NIES, NIES Teacher Questionnaire(s)	Original	N/A	N/A	
School/Teacher Roster of Questionnaires	Original	Photocopy, without names	Photocopy, without names	
Dated Parent Notification Letter sent by School	N/A	Copy from School	Copy from School	
Student Booklet ID labels	If sampled after 11/26	N/A	N/A	
Assessment Information Form	N/A	Completed	Completed	
NAEP 2009 Listing of Sampled Students	By session	N/A	N/A	
School Certificate of Appreciation and folder	Original	N/A	N/A	
Signed Teacher Observer Letter(s)	N/A	(if applicable) White copy only	(if applicable) White copy only	
Signed Accommodation Teacher Letter(s)	N/A	(if applicable) White copy only	(if applicable) White copy only	
Session Debriefing Forms	N/A	Completed, 1 per session	Completed, 1 per session	
Grade 12 Strategies Form	N/A	(if applicable) Completed	(if applicable) Completed	
Telephone Follow-Up QC Form	N/A	N/A	(if applicable)	
In-Person QCF	N/A	N/A	(if applicable)	
School Folder QC Checklist	N/A	N/A	Completed	
FIELD MANAGER: Be sure all AC Supervisor documents above are included before final shipment to Westat.		FM Initials	Comments	

WHITE: SCHOOL FOLDER PINK: FIELD MANAGER BLUE: SUPERVISOR GOLD: AC GREEN: SUPERVISOR

State Information Form

Your field manager has developed a State Information Form (shown on page B.6) for the state in which you work. The purpose of the form is to notify you about specific state issues or requirements that you need to know to properly conduct assessments, collect questionnaires, and otherwise deal with schools. It will include agreements or requirements that the states expect assessment coordinators (ACs) and assessment administrators (AAs) to observe when in schools. It will also include information about whether the state- or NAEP-provided Parent/Guardian Notification Letter is used; the demographic variables used during E-Filing (e.g., the “Information unavailable at this time” [shown as blanks], will require you to collect the missing data at the preassessment or assessment visit); or if the “formerly ELL” code is used (only used in specific states); as well as information about specific accommodations that are or are not permitted by the states.

Your supervisor will review this form with you during AC Training and keep you up to date on any changes made to it during the assessment period.

State Information Form

NAEP 2009
State Information Form

1. State Contact Information

Date Last Updated:	State:
	TUDA(s):
NAEP State Coordinator (NSC):	Primary Phone:
	Fax:
	Email:
	Preferred method of communication:
Check if this is a new NSC (start date after September 2006).	

2. TUDA Contact Information

TUDA:	Primary Phone:
TUDA Coordinator:	Fax:
	Email:
	Preferred method of communication:
Communication:	<input type="checkbox"/> Only through NSC
	<input type="checkbox"/> Both NSC and TUDA Coordinator
	<input type="checkbox"/> Directly with TUDA Coordinator
TUDA:	Primary Phone:
TUDA Coordinator:	Fax:
	Email:
	Preferred method of communication:
Communication:	<input type="checkbox"/> Only through NSC
	<input type="checkbox"/> Both NSC and TUDA Coordinator
	<input type="checkbox"/> Directly with TUDA Coordinator
TUDA:	Primary Phone:
TUDA Coordinator:	Fax:
	Email:
	Preferred method of communication:
Communication:	<input type="checkbox"/> Only through NSC
	<input type="checkbox"/> Both NSC and TUDA Coordinator
	<input type="checkbox"/> Directly with TUDA Coordinator

Confidentiality Agreement

The National School Lunch Program (NSLP) is a federal meal program that provides low-cost or free lunches to eligible students. A letter from the U.S. Department of Agriculture, authorizing the release of the NSLP data as part of the NAEP data collection process, is sent to the school coordinator in the Preassessment Packet.

For most schools, the NSLP data was already released during the student list submission process by the school, district, or state in the fall of 2008. However, if some or all of the NSLP data is missing on the Administration Schedule, you must attempt to collect it during the preassessment visit. In this case, refer the school to the U.S. Department of Agriculture letter (shown below). If a school requests a confidentiality agreement in writing to release the NSLP data on their students, the confidentiality form is available for you to sign and use for this purpose.



UNITED STATES DEPARTMENT OF EDUCATION
INSTITUTE OF EDUCATION SCIENCES

NATIONAL CENTER FOR EDUCATION STATISTICS

**Agreement Between NAEP Officials and School Food Authority Regarding
Collection of Free and Reduced Price Meals Data**

Under this agreement, a NAEP Official, as an agent of the National Center for Education Statistics (NCES), U.S. Department of Education, shall collect the eligibility status for free or reduced price meals for the children sampled for the National Assessment of Educational Progress (NAEP). An agent of the School Food Authority shall provide the eligibility information to the NAEP Official.

Both parties understand that:

- o The School Food Authority shall provide the eligibility status to the NAEP Official for those children selected to participate in NAEP.
- o The NAEP Official shall adhere to Section 303 of the National Assessment of Educational Progress Authorization Act, Title III of the Education Sciences Reform Act of 2002, 20 U.S.C. 9621, which states that:
 - o NCES shall use the eligibility information as part of the federal administration of NAEP under the requirement to include information on special groups, including, whenever feasible, information collected, cross tabulated, compared, and reported by socioeconomic status. NCES uses eligibility for free and reduced price meals as a proxy for socioeconomic status.
 - o NCES may only collect information that is directly related to the appraisal of academic achievement, and to the fair and accurate presentation of such information.
 - o The Commissioner for Education Statistics shall ensure that all personally identifiable information about students, their academic achievement, and their families, and that information with respect to individual schools, remains confidential, in accordance with section 552a of title 5, United States Code.
- o Under the Privacy Act of 1974 (section 552a of title 5, United States Code), should there be a case of unauthorized disclosure, civil action may be brought against the U.S. Department of Education.

<p>U.S. Department of Education:</p> <p> _____ (Signature)</p> <p>Peggy Carr _____ (Name)</p> <p>Associate Commissioner _____ (Title)</p> <p>National Center for Education Statistics _____ (Organization)</p> <p>1990 K Street NW, 8th Floor _____ (Address)</p> <p>Washington, DC 20006 _____ (City, State, Zip)</p>	<p>NAEP Official:</p> <p>_____ (Signature)</p> <p>_____ (Name)</p> <p>_____ (Title)</p> <p>_____ (Organization)</p> <p>_____ (Address)</p> <p>_____ (City, State, Zip)</p>	<p>School Food Authority:</p> <p>_____ (Signature)</p> <p>_____ (Name)</p> <p>_____ (Title)</p> <p>_____ (School)</p> <p>_____ (Address)</p> <p>_____ (City, State, Zip)</p>
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Our mission is to ensure equal access to education and to promote educational excellence throughout the Nation.

Quality Control Booklet (QCB)

The QCB (shown below) is your guide throughout the assessment process at each school. Because the QCB is the only document that tracks your work with the school throughout the entire process of planning and supervising assessment activities, you must complete one for each school. The QCB has been developed to ensure that accurate and consistent data are collected for each school. Detailed information about the QCB is provided in chapter 1.

NAEP 2009 QUALITY CONTROL BOOKLET					
School Information				Contact Summary	
School ID #: _____ Region: _____ Area: _____				<u>AC:</u> _____	
Assessment Date: _____				<u>PAV Conducted By:</u> _____	
School Name: _____				<u>Date PAV Completed:</u> _____	
School Address: _____ _____				<u>Assigned AAs:</u> _____ _____ _____ _____ _____	
Telephone #: _____					
Principal: _____					
School Coordinator: _____					
Telephone #: _____					
Sessions: _____ _____					
NIES: YES / NO					
ESBQ: YES / NO					
HSTS: YES/NO					
Take-All: YES / NO					
Student Sampling Summary Report? YES / NO					
Schedule for Regular Assessment Sessions					
Session #	# of Students	Date	Time	Location	Assigned AA
Schedule for Accommodation Sessions					
Group #	# of Students	Date	Time	Location	Assigned AA
Schedule for NIES Survey Sessions					
# of Students	If Grade 8: Read Aloud?	Date	Time	Location	Administrator

The Inclusion Worksheet

You will use the NAEP Inclusion Worksheet (shown below) to keep track of accommodation decisions for all students classified as SD (with disabilities) and/or ELL (English language learners) at each school. When you receive this form in the School Folder from your supervisor, it will be preprinted with the names of the SD and/or ELL students in the school along with the subject in which each student is selected to be assessed.

You or your assisting AA will transcribe accommodation information onto the Inclusion Worksheet at the school on the day of the preassessment visit, once you have received the completed SD and/or ELL Questionnaires or the SD/ELL Online Questionnaire Summary from the school coordinator.

NAEP 2009 INCLUSION WORKSHEET																																			
Student Information			Accommodations Allowed on NAEP (those marked in Col. A-Q, 4)																																
Student Name	Section #	Subject	NAEP Codes										Review questions 3, 5, and 6 in the SD and ELL Questionnaires and check the appropriate columns below.	Notes																					
Line #	Priority	Subarea	BRK	OTH	BB	BD	OTD	OTH	REA	REA	BRK	LRG			MAG	OTH	SCR	OTH	OTH	OTH	ONE	OTH	OTH	ESK	OTH	OTH									
			Directions only read aloud in native language (r, m, s)	Test items read aloud in native language (m, s)	Bilingual version of the test booklet (r, s)	Bilingual dictionary without definitions (r, s)	Directions only signed (r, m, s)	Test items signed (r, s)	Read aloud occasional words or phrases (r, s)	Read aloud most or all of test material (r, s)	Braille version of test (r, m, s)	Large print version of test (r, m, s)	Magnification equipment (r, m, s)	Response in sign language (r, m, s)	Response with Braille typewriter (r, m, s)	Points or responses orally to a scribe (r, m, s)	Response by computer or typewriter (r, m, s)	Uses template to respond (r, m, s)	Uses special writing tool (r, m, s)	Small group (r, m, s)	One-on-one (r, m, s)	Study card (r, m, s)	Phonemically read, light, familiar (r, m, s)	Selected Start/ Administrator (r, m, s)	Extended time (r, m, s)	Breaks during test (r, m, s)	Other (Record in NOTES column)	Includes Without Accommodations	Includes With Required Accommodations	Includes With Permitted Accommodations	Excludes (Record response in NOTES column)	Includes With Only NAEP Permitted Accommodations			