

## 2014 ACCESS for ELLs®

### I. ACCESS Test Ordering Dates: October 21, 2013 –November 15, 2013

### II. Testing Schedule for the 2013-2014 ACCESS for ELLs®

#### Regular 2013-2014 ACCESS Dates:

Grades	Subjects	Dates
K-12	Reading, Writing, Listening, & Speaking	January 13 – February 14, 2014

#### Waiver Options

The deadline for requesting a modified ACCESS testing schedule is October 25, 2013. ISBE allows districts to apply for a testing schedule waiver if the regular ACCESS testing schedule conflicts with the school/district calendar, or other unusual conditions arise.

The ACCESS for ELLs® testing schedule may vary among individual schools within a district. Even so, waiver applications for individual schools must come from the *district superintendent*.

The optional testing dates for ACCESS for ELLs® are:

#### Option 1:

Grades	Subjects	Dates
K-12	Reading, Writing, Listening, & Speaking	January 20 – February 21, 2014

#### Option 2:

Grades	Subjects	Dates
K-12	Reading, Writing, Listening, & Speaking	January 27 – February 28, 2014

Regardless of which testing schedule is implemented, it is *absolutely imperative* to meet all deadlines for returning materials to the scoring contractor - MetriTech. Failure to meet these deadlines may jeopardize the return of results to your school/district in a timely fashion. If you have questions, contact the Student Assessment Division at 866/317-6034.

Waiver Application Form To  
Modify Testing Dates for the 2013-14 ACCESS for ELLs<sup>®</sup>

***The deadline for returning this form is October 25, 2013***

This page must be faxed or mailed to ISBE as soon as possible, but no later than October 25, 2013, for districts/schools that will NOT test during the regular testing dates (January 13 – February 14, 2014), with the ACCESS for ELLs<sup>®</sup>. Decisions regarding the request will be returned via fax no later than November 1, 2013.

Complete District Name, Number, Address, and Phone/FAX numbers:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Region/County/District/Type (RCDT) Code \_\_\_\_\_

District Phone: \_\_\_\_\_

District FAX: \_\_\_\_\_

The district named above requests to conduct testing for the ACCESS for ELLs<sup>®</sup> Reading, Writing, Listening, and Speaking tests (Kindergarten – Grade 12) during the following time period **(check one)**:

\_\_\_\_\_ **Option 1:** January 20 – February 21, 2014      \_\_\_\_\_ **Option 2:** January 27 – February 28, 2014

**Application for:**      \_\_\_\_\_ Entire District      \_\_\_\_\_ Individual School(s) (attach a list if more than one school)

\_\_\_\_\_  
School Name \_\_\_\_\_ RCDTS Code \_\_\_\_\_

**Reason for Request (check one):**

\_\_\_\_\_ Local testing conflict      \_\_\_\_\_ Intersession for year round school calendar      \_\_\_\_\_ Other

(please explain): \_\_\_\_\_

In requesting this modified testing schedule, your district agrees to return all test materials to the contractor according to arrangements that will be made by the contractor. Not returning test materials by established deadlines may jeopardize your results being returned in a timely fashion.

\_\_\_\_\_  
Name of Superintendent (printed)

\_\_\_\_\_  
Signature of Superintendent \_\_\_\_\_ Date \_\_\_\_\_

Mailing Address: Illinois State Board of Education  
Student Assessment Division – E216  
Attention: Cathy  
100 North First Street  
Springfield, IL 62777-0001

ISBE FAX Number: (217) 782-6097

**For Office Use Only:**

This request was approved by:

\_\_\_\_\_  
Signature of Division Administrator \_\_\_\_\_ Date \_\_\_\_\_