



CONNECTICUT STATE
DEPARTMENT OF EDUCATION

2019-20 Connecticut Alternate Assessment Eligibility Form

**Required for Participation in the
Connecticut Alternate Assessment System**

Revised 9/23/19

Connecticut Alternate Assessment (CTAA & CTAS) Eligibility Form

STUDENT NAME: _____ SASID: _____

Please indicate the student's Primary Disability as evidenced by the most recent Individualized Education Plan (IEP):

- | | |
|---|--|
| <input type="checkbox"/> Autism | <input type="checkbox"/> Deaf/Blindness |
| <input type="checkbox"/> Developmental Delay | <input type="checkbox"/> Emotional Disturbance* |
| <input type="checkbox"/> Hearing Impairment | <input type="checkbox"/> Intellectual Disability |
| <input type="checkbox"/> Multiple Disabilities | <input type="checkbox"/> Orthopedic Impairment |
| <input type="checkbox"/> Other Health Impairment <i>or</i> OHI - ADD/ADHD | <input type="checkbox"/> Specific Learning Disability* <i>or</i> SLD/Dyslexia* |
| <input type="checkbox"/> Speech/Language Impairment | <input type="checkbox"/> Traumatic Brain Injury |
| <input type="checkbox"/> Visual Impairment | |

***Please note: Specific Learning Disability, SLD/Dyslexia and Emotional Disturbance** – Sections 34 CFR 300.309 (3)(a)(1) and (2) and 300.8(c)(4)(i) of the IDEA require that intellectual factors/impairments be ruled out in order to qualify for special education services under the categories of a specific learning disability or emotional disturbance. Therefore, students with these primary disability types would not typically qualify to participate in the CTAA or CTAS.

The student must meet all criteria outlined below to participate in Connecticut Alternate Assessments.

This student has a significant cognitive disability, as evidenced by:

1. Student has an intellectual impairment.

- A. No evidence exists to support that this student has an intellectual impairment.
STOP: student is not eligible to participate in the alternate assessment system.
- B. In the absence of standardized, cognitive assessments/scores, there is evidence to substantiate the presence of an intellectual impairment.
OR
- C. Results of cognitive testing (e.g., Full-Scale IQ score < 70, developmental age):
- Assessment Used: _____
 - Date Completed: _____ (dd/mm/yyyy)
 - Composite Score: _____

2. Student has adaptive behavior well below age-level expectations.

Adaptive behavior is defined as those conceptual, social, and practical skills necessary to meet the common demands of everyday life across multiple settings.

- A. Student has adaptive behaviors necessary for the student to live independently and function safely in daily life for their age group (34 CFR §§ 200.1(d) and 300.160 (c)).
STOP: student is not eligible to participate in the alternate assessment system.
- B. Results of adaptive behavior assessment(s) (e.g., scored more than 1.5 standard deviations below average); include both teacher/parent ratings where available:
- Assessment Used: _____
 - Date Completed: _____ (dd/mm/yyyy)
 - Composite/Functional Level: _____
and/or Domain/Rating Scale (If applicable):

3. Student requires intensive instruction and significant supports.

- A. Student does not require extensive, repeated, individualized instruction.
STOP: student is not eligible to participate in the alternate assessment system.
- B. Student requires extensive, repeated instruction and support that is not of a temporary or transient nature, and uses substantially adapted materials and individualized methods of accessing information in alternative ways to acquire, maintain, demonstrate, and transfer skills.

Connecticut Alternate Assessment

Eligibility Form

VERIFICATION SECTION

1. I verify that supporting evidence related to the student's assessment options was discussed at the PPT on _____ (date of PPT) to determine eligibility for participation in Connecticut Alternate Assessments.
2. Evidence reviewed during the PPT was used to determine that the student meets all three evidence-based criteria for participation in Connecticut Alternate Assessments:
 - a) Student has an intellectual impairment with supporting evidence per cognitive testing or other details/evidence exist to substantiate the existence of an intellectual impairment.
 - b) Student's adaptive behavior is well below age-level expectations with supporting evidence per adaptive behavior assessment(s) (e.g., scored more than 1.5 standard deviations below average).
 - c) Student requires intensive instruction and significant supports.

This student is eligible for and will participate in Connecticut Alternate Assessments during the current school year as indicated on page 9 of their IEP. The Connecticut Alternate Assessment Eligibility Form must be submitted through the Data Entry Interface by the appropriate due date.

Note: If the student *does not* meet all three evidence-based criteria for participation in Alternate Assessments as indicated above, **the student will participate in the standard state-wide assessments with designated supports, accommodations, and assistive technology (if applicable) as indicated on page 8 of their IEP.**

Note: Once this form is completed and approved by the Planning and Placement Team, please provide a copy to the Director of Special Education and the District Test Administrator prior to testing for necessary planning and action.

Primary Special Education Teacher/TEA

Printed Name: _____ (Please Print) _____ Telephone Number _____

Signature: _____ EIN: _____
10-digit Educator ID Number Date

Note: TEAs *do not* need to provide their EIN on this paper form, however it is required when submitting the Connecticut Alternate Assessment Eligibility Form through the Data Entry Interface to register the student for Alternate Assessment participation.