North Port High School

Cambridge Assessment Access Arrangements Form

Candidate Name: _____ Grad year: _____

SECTION A: Access Arrangements: These are the accommodations offered for Cambridge exams. Put a check in the box of the arrangement(s) requested.

To request an accommodation that is not listed, please contact Ms. Cabrera directly.

☐ **No Access Arrangements requested for AICE testing in the Spring of 2027**

FOR ANY OF THE ACCESS ARRANGEMENTS BELOW, THE REQUESTED ACCOMMODATION MUST BE LISTED AS A TESTING ACCOMMODATION ON THE STUDENT'S 504 OR IEP.

CLASSROOM ACCOMMODATIONS DO NOT APPLY TO AICE TESTING.

What type of documentation does the student have? _____ 504 plan _____ IEP
What is the student's disability/diagnosis? _____
_____

☐ **25% extra time**

☐ **Prompter** (*proctor can remind candidate to get back to work or move on to the next question*)

☐ **Supervised breaks** (*only if there is a medical reason*)

☐ **Word Processor** (*if candidate has a physical impairment which results in difficulty writing – fill out back page*)

☐ **Large Print** (*for students with visual impairment - must be ordered IN JANUARY)*

☐ **Exemption from speaking component** *(Hearing impairment only)*

☐ **50% extra time** If a student would like to request 50%, that student must meet one of the following criteria:

1. multiple disabilities
2. severe physical handicaps
3. blindness

Please fill out the back of this form to apply for 50% extra time or a Word Processor.

I attest that the information provided in this application is true to the best of my knowledge. I further give my permission for the Cambridge exams officer to disclose this information to Cambridge Assessment International Education for the purposes of securing access arrangements for this candidate on Cambridge examinations.

Parent/Guardian Signature: _____ Date: _____

I attest that the information provided in this application is true to the best of my knowledge.

Candidate Signature: _____ Date: _____

If you need to change your request prior to testing, please fill out a new form and turn it in by March 1.

OPTIONAL DOCUMENTATION

Cambridge requires us to defend a request for Access Arrangements above 25% or for a word processor by describing how the student's disability is a barrier to that student demonstrating their learning on a Cambridge exam. If you are applying for more than 25% or a word processor, please fill out this side of the form and return it or email your answers to Ms. Cabrera-Fernandez: (Yoelin.cabrera-fernandez@sarasotacountyschools.net).

SECTION B: Barriers to Assessment

Explain how the student's disability /diagnosis prevents them from performing up to their ability on AICE exams.

_____

_____

_____

_____

SECTION C: History of Assessment Accommodations: Please list current accommodations the student has been approved for on state/national assessments and awarding body. (e.g., 25% extra time on SAT -College Board, etc.):

_____

_____

Please describe how often and in what circumstances the candidate uses their accommodations in testing situations. You may include classroom assessments and standardized tests such as FAST. (e.g. "The student typically uses 25% extra time on half of the tests he/she takes in the classroom and always uses the full 25% extra time on standardized tests that require written responses.")

_____

_____

_____

_____

SECTION D: Evidence

If you have any evidence of disability/ diagnosis THAT THE SCHOOL DOES NOT ALREADY HAVE (preferably dated within 36 months of the exam series) please send it to Ms. Cabrera or your child's counselor at North Port High School. **Evidence must include**: Printed name of qualified specialist, number of years of experience in field, credentials of qualified specialist, and their signature.

I attest that the information provided in this application is true to the best of my knowledge. I further give my permission for the Cambridge exams officer to disclose this information to Cambridge Assessment International Education for the purposes of securing access arrangements for this candidate on Cambridge examinations.

Parent/Guardian Signature: _____ Date: _____

I attest that the information provided in this application is true to the best of my knowledge.

Candidate Signature: _____ Date: _____