

Accommodations: WIDA Screener for Kindergarten



Completed by: _____

Date: _____

Student: _____

ID number: _____

District/School: _____

Grade: _____

Team Members: _____

Accommodations:

- 1. Extended testing of a test domain over multiple days (EM).** *Provide written request and evidence of need to state education agency.*

Listening ☐

Speaking ☐

Reading ☐

Writing ☐

- 2. Interpreter signs directions in ASL (SD).** *Sign administration instructions, test directions, and practice items. Do not sign scored items.*

Listening ☐

Speaking ☐

Reading ☐

Writing ☐

- 3. Scribe (SR).** *A trained adult records student responses during testing.*

Listening ☐

Speaking (not applicable)

Reading ☐

Writing ☐

- 4. Recording device and transcription (RD).** *Clear device after transcription.*

Listening (not applicable)

Speaking (not applicable)

Reading (not applicable)

Writing ☐

- 5. Test administered in a non-school setting (NS).** *Provide written request and evidence of need to state education agency.*

Listening ☐

Speaking ☐

Reading ☐

Writing ☐

- 6. Word processor or similar keyboarding device (WD).** *Clear device after verbatim transcription.*

Listening ☐

Speaking (not applicable)

Reading ☐

Writing ☐