## Virginia Assessment Program Calculator Accommodation Criteria Form

This form takes effect beginning with the 2017-2018 test administrations and replaces all documentation pertaining to calculator accommodations for student with disabilities as used on state assessments.

This form is to be completed by an IEP Team/504 Committee to document that a student with a disability qualifies for the calculator accommodation on a mathematics and/or science Standards of Learning (SOL) test or Virginia Substitute Evaluation Program (VSEP) assessment. The calculator accommodation must be necessary for the student to access the state assessment, and it must be directly related to the student's disability. The calculator accommodation is not intended to enhance student performance for students with disabilities whose skills in performing mathematical calculations are below grade level.

Student	t Information:					
Student	t Name:	State Testing Identifier (STI):	<del></del>			
School I	Division:	School:				
Teache	r:	Grade:				
Primary	/ Disability:	Secondary Disability (if applicable):				
Test and	d Calculator Accommod	dation Information:				
Test Na	me:	Calculator Name and Model:				
Justifica	ation:					
The IEP student		must respond to the questions below, and the form mu	ust be retained as part of the			
1.		e a current IEP/504 Plan that documents, or will documulator indicated above?	ent, the student's disability			
	If the response is No, then the use of this calculator cannot be approved.					
2.		c disability, has the student routinely used this specific	calculator in the classroom to			
	· ·	provide details of the student's experience with the cal e the calculator before completing the assessment.	lculator and how the student			

For questions 3, 4, and 5 that follow, any "Yes" response must also include a justification statement. The *Checklist* of *Mathematical Capabilities* for *Approved Calculators* provided with this form must be referenced when completing a justification statement, and the statement must include:

- a description of the impact of the student's disabilities as related to mathematics,
- the calculator's accessibility features and/or additional mathematical capabilities needed by the student, and
- an explanation of how the specific characteristics of the student's disabilities are addressed by the features or capabilities of the calculator.
  - 3. Does the student need to use a calculator with accessibility features (e.g., large display, large button, audio) to access the SOL test or VSEP assessment? \_\_\_\_\_\_

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	Justification Stateme	ent:						
	mathematical capab Accommodation Rec Improvement with a	ote 1: If the calculator with accessibility features needed by the student also has additional nathematical capabilities that are not needed (see #4 below), a completed Special Assessment ccommodation Request Form must be submitted to the Division of Student Assessment and Schoon provement with a copy of this completed Calculator Accommodation Criteria Form. An explanation ow student access to the additional mathematical capabilities will be prevented during testing must rovided.						
	impairments, includicalculator must be for that, even with corresportial sight and blinchildren who have le	ing blindness; however ollowed. A visual impa ection, adversely affect adness (34 CFR §300.8( earning problems that	r, the conditions outlined in irment, including blindness is a child's educational per c) (13)). The term "visual in	may be used by students with visun the Appendix for the specific s, means an impairment in vision formance. The term includes both mpairment" does not include visual-motor or perceptual deficits; liagnoses.				
4.	Does the student need to use a calculator with additional mathematical capabilities to access the SOL or VSEP assessment?							
	Justification Stateme	ent						
5.		student need to use a calculator, arithmetic tables, or machines to access the section of the SOL tics test in which a calculator is not allowed (SOL Mathematics tests for grades 3-7)?						
	Justification Statement							
ea	m/504 Committee Sig	gnatures:						
e/F	Position	Print Name	Signature	Date				
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## IEP Te

Title/Position	Print Name	Signature	Date

This calculator accommodation criteria form and associated documentation is subject to audit by the Division of Student Assessment and School Improvement.