

Off-Island Alternative Site Administration Request Form for Paper/Pencil HSAP Assessments

Verification of Student Need Form

This form is to be used to request off-island administration for a student who is receiving services at an Alternative site, Home/Hospital Instruction site, or Serious Disciplinary Action site. Schools are responsible for assessing these students if they are receiving services on-island.

Date:			
Student Name:		10-digit Student ID:	Grade Level:
School Name:	School Name: School Code:		
School Street Add	ress (Street, City, Zip Code - No F	P.O. Box):	
School Contact Pe	erson Name:		
School Contact Pe	erson Telephone Number:		
School Contact Pe	erson E-mail:		
Indicate assessme	ent(s) or exam(s) for which paper/	pencil materials are request	ted:
	☐ Smarter Balanced ELA/Lite	eracy 🗆 Smarter Balanced	Mathematics
	☐ HSA Science (NGSS)	☐ Biology 1 (NGSS) E	EOC
	\square Algebra 1 EOC	☐ Algebra 2 EOC	
the Smarte Smarter Ba performand	r Balanced ELA/Literacy or a CAT a lanced paper/pencil assessment be task, as appropriate.	of the Smarter Balanced ma will include a paper/pencil f	or online) for both the CAT and PT of thematics assessment. Requesting a fixed-form test and/or a paper/pencil
Institution or Loca	ition Address:		
Institution or Loca	ition Telephone Number:		
Institution or Loca	ition Contact Person Name:		
Institution or Loca	tion Contact Person Telephone N	umber:	
Institution or Loca	ition Contact Person Email:		
All students tested	d at OFF-ISLAND sites will be give	n HSAP assessments in a pa	per/pencil format.
V 16 1 V		essment Section Use Only	
Verified: Y or N Name and Date:			

Fax the completed form to the Assessment Section at (808) 733-4483. The school Test Coordinator should retain the original form for documentation purposes.