

Oklahoma School Testing Program (OSTP)

BUILDING LEVEL TEST SECURITY FORM

This form is to be distributed to the appropriate school building in which the OSTP tests are to be administered.

This form must be signed by the Building Test Coordinator and the building principal to certify that the security measures identified on this document have been maintained at the building level. This signed form must be returned to your District Test Coordinator so it can be returned to Measured Progress. Failure to return this completed, signed form can result in invalidation of OSTP scores for this building site.

I hereby certify that:

- **I have trained all Test Administrators and Test Proctors in the test administration procedures of the OSTP, including but not limited to, the Testing Rules of the State Board of Education that pertain to maintaining test security, adhering to proper test administration, and penalties for violations of testing procedures.**
- To the best of my knowledge, no reproduction of the test books, online test, or any secure materials related to the testing program have been made in the school. All original test booklets, scorable documents, and related test materials (both used and unused) have been packaged as per directions in the Building Test Coordinator's section of the *Test Preparation Manual* and returned to the District Test Coordinator.
- I have observed that teachers have covered or removed all posters and visual aids and nothing is taped or placed on students' desks unless it is an allowable testing accommodation of English Language Learners (ELL) or students on an Individualized Educational Program (IEP) or 504 Plan.
- I certify that the administrations of the OSTP tests in my school building were administered by certified Test Administrators and monitored by trained persons other than the Test Administrator throughout the duration of the testing sessions.
- I have read and understand the preceding statements. Further, I understand that violations of the OSTP rules can result in revocation of my teaching and/or administrative certificates.

PENCIL OR PEN CAN BE USED BELOW

_____	_____	_____
Building Test Coordinator's Name (printed)	Building Test Coordinator's Signature	Date Signed
_____	_____	_____
Building Principal Name (printed)	Building Principal Signature	Date Signed

If you cannot certify that all the above conditions have been met, please attach a letter on official letterhead describing the situation and the measures undertaken to resolve the situation.

BARCODE GOES HERE
(Measured Progress Use Only)

KEEP A COPY FOR YOUR RECORDS: DO NOT STAPLE