

Appendix A-1: DeSSA Accessibility Form Cover Page

General Student Information:

Completion Date:		
Student Name:		
Date of Birth:		
Student ID:		
District:		
School:		
Grade:		
Implementation Date:		
Select the appropriate category:	<input type="checkbox"/> Student has an IEP/504 plan (Levels 1, 2, & 3) <input type="checkbox"/> Student is an English Learner (Levels 1 & 2) <input type="checkbox"/> Student has an IEP/504 plan AND is English Language Learner (Levels 1, 2 & 3) <input type="checkbox"/> Student is a General Education Student with identified needs (Levels 1 and 2)	
SAT students	<input type="checkbox"/> Student will use College Board allowable and reportable accommodations checked under ELA/Math on this document <input type="checkbox"/> Extended time ____% Reading ____% Math ____% Essay You may use Appendix D-2 to notate accommodations for SWDs/IEPs/504 Plans and ELs. Appendix D-3 has descriptions	
List below any accessibility features selected for which the student needs additional practice or preparation. Describe what practice or preparation is needed:		
Accommodation Code/Description	Assessment/Content Area	What practice/preparation is needed?

**Grade 3 student exception: A grade 3 student may use this table if used in instruction and documented in the student’s IEP/504 and the
 *** Print-on-Request – For a student who does not have IEP/504 ---- Submit a Unique Accommodation Request
 † Not available as a checkbox in TIDE **Bold – DOE approval required** **Bold – DOE approval required**

Embedded: Provided by the Test Delivery System **Non-Embedded:** Provided outside the Test Delivery System

Level 1: Universal							Level 2: Designated Supports						
Embedded	A-2 DESC.	ELA	ELA-PT	MATH	SCI	SOC ST	Embedded	A-2 DESC.	ELA	ELA-PT	MATH	SCI	SOC ST
None	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	None (Disable Universal Tools)	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Answer Eliminator	1	-	-	-	Y	Y	Color Choices (Black on White)	4	Y	Y	Y	-	-
Answer Masking	1	-	-	-	Y	Y	Black on Rose		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	-	-
Breaks/Pause (Resume Restriction)	1	Y	Y	Y	Y	Y	Blue		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	-	-
Calculator	1	-	-	Y	-	-	Gray		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	-	-
Digital Notepad	1	Y	Y	Y	Y	Y	Green		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	-	-
English Dictionary	1	Y	Y	Y	-	-	Light Blue		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	-	-
English Glossary	1	Y	Y	Y	-	-	Light Gray		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	-	-
Expandable Passages	2	Y	Y	-	-	-	Light Green		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	-	-
Five Function Calculator (Gr.8, HS)	2	-	-	-	Y	-	Light Magenta		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	-	-
Global Notes	2	-	Y	-	-	-	Light Yellow		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	-	-
Highlighter	2	Y	Y	Y	Y	Y	Medium Gray on Light Gray		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	-	-
Keyboard Navigation	2	Y	Y	Y	Y	Y	Reverse Contrast		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	-	-
Line Reader	2	Y	Y	Y	Y	Y	Yellow		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	-	-
Magnifier	2	-	-	-	Y	Y	Yellow on Blue		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	-	-
Mark for Review	2	Y	Y	Y	Y	Y	Masking	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	-	-
Math Tools	2	-	-	Y	-	-	Permissive Mode	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	-	-
Notepad	2	-	-	-	Y	Y	Spanish	5	-	-	-	<input type="checkbox"/>	<input type="checkbox"/>
Spell Check	2	Y	Y	Y	Y	Y	Streamline	6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	-	-
Strikethrough	2	Y	Y	Y	-	-	Text to Speech	5					
Text-to-Speech	2	-	-	-	Y	Y	Passage/Stimuli Items		-	<input type="checkbox"/>	<input type="checkbox"/>	-	-
Thesaurus	2	Y	Y	Y	-	-	Items		<input type="checkbox"/>	-	-	-	-
Writing Tools	3	Y	Y	Y	Y	Y	Translation of Key Terms	5	-	-	-	<input type="checkbox"/>	<input type="checkbox"/>
Zoom	3	Y	Y	Y	Y	Y	Translated Test Directions	5	-	-	<input type="checkbox"/>	-	-
Non-Embedded							Translations – Glossaries English	5	Y	Y	Y	-	-
None		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Arabic & English		-	-	<input type="checkbox"/>	-	-
Breaks (Frequent Breaks)	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Arabic		-	-	<input type="checkbox"/>	-	-
English Dictionary	3	-	<input type="checkbox"/>	-	-	-	Cantonese & English		-	-	<input type="checkbox"/>	-	-
Familiar Test Administrator	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Cantonese		-	-	<input type="checkbox"/>	-	-
Modified Lighting	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	-	-	Filipino & English		-	-	<input type="checkbox"/>	-	-
Refocus	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Filipino		-	-	<input type="checkbox"/>	-	-
Scratch/Blank/Grid Paper	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hmong & English		-	-	<input type="checkbox"/>	-	-
Small Group	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hmong		-	-	<input type="checkbox"/>	-	-
Specialized Equip/ Furniture	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Illustration	4	-	-	<input type="checkbox"/>	-	-
Specified Area or Seating	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Illustration & English		-	-	<input type="checkbox"/>	-	-
Thesaurus	4	-	<input type="checkbox"/>	-	-	-	Korean & English		-	-	<input type="checkbox"/>	-	-
Time of Day	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	-	-	Korean		-	-	<input type="checkbox"/>	-	-
+ Whiteboard/Assistive Devices	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Mandarin & English		-	-	<input type="checkbox"/>	-	-

Level 2: Designated Supports							Level 2: Designated Supports						
Embedded	A-2 DESC	ELA	ELA-PT	MATH	SCI	SOC ST	Non-Embedded	A-2 DESC	ELA	ELA-PT	MATH	SCI	SOC ST
Mandarin		-	-	<input type="checkbox"/>	-	-	Unique Accommodation	9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Punjabi & English		-	-	<input type="checkbox"/>	-	-	WhisperPhone®	9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	-	-
Punjabi		-	-	<input type="checkbox"/>	-	-	Level 3: Accommodations						
Russian & English		-	-	<input type="checkbox"/>	-	-	Embedded						
Russian		-	-	<input type="checkbox"/>	-	-	None	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Somali & English		-	-	<input type="checkbox"/>	-	-	American Sign Language Video	9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Somali		-	-	<input type="checkbox"/>	-	-	Braille	9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Spanish & English		-	-	<input type="checkbox"/>	-	-	Contracted		<input type="checkbox"/>	<input type="checkbox"/>	-	-	-
Spanish		-	-	<input type="checkbox"/>	-	-	Uncontracted		<input type="checkbox"/>	<input type="checkbox"/>	-	-	-
Ukrainian & English		-	-	<input type="checkbox"/>	-	-	Nemeth		-	-	<input type="checkbox"/>	-	-
Ukrainian		-	-	<input type="checkbox"/>	-	-	Braille Transcript (ELA List Passages)	9	<input type="checkbox"/>	<input type="checkbox"/>	-	-	-
Vietnamese & English		-	-	<input type="checkbox"/>	-	-	Closed Captioning	9	<input type="checkbox"/>	<input type="checkbox"/>	-	-	-
Vietnamese		-	-	<input type="checkbox"/>	-	-	Emboss (passages/stimuli/items)	9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	-	-
Translations – Stacked (Spanish)	5	-	-	<input type="checkbox"/>	-	-	Emboss Request Type On-Request	9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	-	-
Zoom Choose: <input type="checkbox"/> 1x <input type="checkbox"/> 1.5x <input type="checkbox"/> 1.75x <input type="checkbox"/> 2.5x <input type="checkbox"/> 3x <input type="checkbox"/> 5x <input type="checkbox"/> 10x <input type="checkbox"/> 15x	6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	-	-	Auto-Request		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	-	-
							N/A- not using refreshable Braille		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	-	-
							Mouse Pointer	10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	-	-
							Print on Request Passage/Stimuli/Items	10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	-	-
							Passage/Stimuli Items		<input type="checkbox"/>	-	-	-	-
Non-Embedded													
None	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Amplification/Assist. Listening Device	6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Text-to-Speech Passages	10	<input type="checkbox"/>	-	-	-	-
Bilingual Dictionary	6	-	<input type="checkbox"/>	-	<input type="checkbox"/>	<input type="checkbox"/>	Non-Embedded						
Color Contrast (printed)	6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	-	-	None	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Color Overlays	7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Abacus	10	-	-	<input type="checkbox"/>	-	-
EL 1st year Exemption	7	<input type="checkbox"/>	<input type="checkbox"/>	-	-	-	Alternate Response	10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Y	Y
Human Interpreter Native Lang	7	-	-	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Arithmetic (grades 4-11)**	11	-	-	<input type="checkbox"/>	-	-
Human Read Aloud Items only	7	<input type="checkbox"/>	-	-	-	-	Braille (P/P)	11	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Passage/Stimuli/Items		-	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Calculator (handheld adaptive)	11	-	-	<input type="checkbox"/>	-	-
Spanish		-	-	<input type="checkbox"/>	-	-	Human Interpreter – Visual Comm	11	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interpret/translate orally - directions	7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	-	-	Human Read Aloud – passages	11	<input type="checkbox"/>	-	-	-	-
Magnification (via external device)	7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	-	-	Hundreds Table (grades 4-11)**	12	-	-	<input type="checkbox"/>	-	-
Medical Supports	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Large Print	12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Noise buffers	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	-	-	Paper/Pencil	12	-	-	-	<input type="checkbox"/>	<input type="checkbox"/>
Paper/Pencil test	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	-	-	Math Manipulatives	12	-	-	<input type="checkbox"/>	-	-
Scribe for EL or Gen Ed	8	<input type="checkbox"/>	-	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Multiplication Table (grades 4-11)**	12	-	-	<input type="checkbox"/>	-	-
Separate Setting in school	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	+ Physical Assistance from TA	12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Y	Y
Separate Setting Not in School	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Scribe for SWD/ SWD/EL	12	-	<input type="checkbox"/>	-	-	-
Simplify directions in English	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	-	-	Scribe – injury	12	Y	Y	Y	Y	Y
Simplify directions in Native Lang	8	<input type="checkbox"/>	<input type="checkbox"/>	-	-	-	Speech-to-Text (used in Permissive Mode)	13	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	-	-
Translated Test Directions - Print	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	-	-	+ TA acts as ASL to English Dictionary	13	<input type="checkbox"/>	<input type="checkbox"/>	-	-	-
Translations –Glossary – P/P	9	-	-	<input type="checkbox"/>	-	-	Word Prediction	13	<input type="checkbox"/>	<input type="checkbox"/>	-	-	-