

Appendix D

Form to Report a Testing Irregularity or Security Breach



OFFICE OF THE STATE
SUPERINTENDENT OF EDUCATION

District of Columbia Statewide Test Security Incident Reporting Form

Please use this form to submit test security incidents to the Office of the State Superintendent of Education (OSSE). **Local Education Agency (LEA) test coordinators should enter incident report content into a ticket via the [OSSE Assessment Portal](#).**

You may report test security incidents in the following ways: (1) online via the [Online Incident Reporting Form](#), or (2) by phone at 202-304-3269. Please report within 24 hours when possible.

Submitted by (optional, please check all that apply):

☐ LEA Test Coordinator ☐ School Test Coordinator ☐ Test Administrator
☐ Test Proctor ☐ Other School Staff ☐ Student
☐ Other _____

LEA (if known): _____ Date/Time of Incident: _____
School: _____ Location of Incident: _____
(i.e., room name/number)

Names and roles of staff involved (if known): _____

Names of students involved (if known): _____

Describe the incident (use the back of this form or attach additional pages if needed). Please include the following details in your description of the incident, if known:

- Assessment (ACCESS for ELLs, Alternate ACCESS, MSAA, DLM, DC CAPE)
- Testing grade and subject
- Testing group name
- Test administrator and proctor names
- Number of students in room/test session

Name of person completing this form (optional): _____ Date: _____