RISE Assessment Observation Form

* Required

Today's Date * Example: January 7, 2019 2. Observers Name * 3. LEA Name * 4. School Name * Teacher's Name * Names of other adults/proctors present *

	Science	Math	ELA	Writing	Column 5	
Grade 3						
Grade 4						
Grade 5						
Grade 6						
Grade 7						
Grade 8						

Beginning Only

End Only

Paraphrased

Beginning and End of the Session

Other:

12.	Were accommodations used by students who have an IEP, 504, or EL plan? Mark only one answer.				
	Mark only one oval.				
	Yes				
	No				
	Not observed				
	Other:				
13.	Additional accommodations comments				
14.	Not counting the observers, how many adults are in the room during the testing session?	*			
	Mark only one oval.				
	1				
	2				
	<u>3</u> +				

15.	What are the adults in the room doing? check all that apply *					
	Check all that apply.					
	sitting at a desk/computer Assisting students with RISE technology Helping students respond to test questions (not technology-related) Walking around to monitor student testing					
	Other:					
16.	Please identify concerns with the testing environment. These could include noise * level within or outside the classroom, student spacing, room temperature, items on walls/desks that provide hints to test questions, etc.					
17.	Did any students ask for help? If yes, what did the teacher do to help them? *					

18.	What are students doing that have finished the assessment? *
19.	In the observer's opinion, what went well with the administration? *
00	In the observer's oninion, what areas were challenging with this test
20.	In the observer's opinion, what areas were challenging with this test administration?

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