**Document C**

**Assessment Data**

**Educational Credit for Exceptional Needs Children (ECENC) Program**

**2024-25**

**Independent School Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

A school applying for participation in the ECENC Program must provide directly to the EOC by **September 1** the following:

**School-level Assessment Results**

**In the chart below, please list the NAME of each national achievement test that was administered and the grade in which the test is administered for the prior school year.** Examples include: TerraNova, Stanford 10, Iowa Test of Basic Skills, MAP, PSAT, SAT, ACT, etc.

For schools that specifically exist to meet the needs of only exceptional needs students with documented disabilities, please document how the school documents students’ academic and social development.

|  |  |  |  |
| --- | --- | --- | --- |
| **Grade** | **English language arts****(Reading)** | **Mathematics** | **Other** |
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**For each national assessment listed above and for each grade with at least 10 students tested, please attach the results from the prior school year.** The manual provides a template for schools to use in reporting mean scale scores, national percentile rankings, etc.

**The individual submitting school-level assessment information must sign below.**

**Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Print Name of Signature Above: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**