

Maryland Comprehensive Assessment Program Chain-of-Custody Form 2021-2022

(Check one subject) (Check one section)	☐ Mathematics ☐ E	_A/Literacy □ MI:	_ = ===================================	
Instructions for the School Test Coordinator: Use this form to track the distribution and return of all secure test materials to and from Test Administrators. Make as many copies of this form as needed. Keep this form in your school files for four years after testing. Do not send this form to Pearson.				
LSS Name:	LSS Number:		School Name:	
Materials Moved from Locked Central Storage Area to Classroom #				
Date: Tim	e:	Nun	nber of Student Authorization Tickets:	
Number of Reference Sheets:	Sheets of So	ratch Paper:		
SchoolTestCoordinator's Name (please print):				
School Test Coordinator's Signature:				
Test Administrator's Name (please	print):			
Test Administrator's Signature:				
Materials Moved from Classroom #to Locked Central Storage Area				
Date: Time:			Number of Student Authorization Tickets:	
Number of Reference Sheets:	Sheets of Scr	atch Paper:		
Number of Reference Sheets: School Test Coordinator's Name (p		atch Paper:		
	please print):	atch Paper:		
School Test Coordinator's Name (p	please print): re:	atch Paper:		
School Test Coordinator's Name (p	please print): re:	atch Paper:		
School Test Coordinator's Name (please	please print): re: print):			
School Test Coordinator's Name (please	please print): re: print): Materials Secu	rely Destroyed	nber of Student Authorization Tickets:	
School Test Coordinator's Name (p School Test Coordinator's Signature Test Administrator's Name (please Test Administrator's Signature:	please print): re: print): Materials Secu	rely Destroyed Nun	nber of Student Authorization Tickets: ets of Scratch Paper:	
School Test Coordinator's Name (passed) School Test Coordinator's Signature Test Administrator's Name (please Test Administrator's Signature: Date: Time	olease print): re: print): Materials Secu	rely Destroyed Nun		
School Test Coordinator's Name (passed to the state of th	Materials Secure:	rely Destroyed Nun		
School Test Coordinator's Name (please Test Administrator's Signature: Date: Tim Number of Reference Sheets: School Test Coordinator's Name (please Test Administrator's Signature:	Materials Secure: ease print):	rely Destroyed Nun She		