

Post-Test Certification Form

This form is to be completed by the School Test Coordinator after test administration.

By submitting this form, I certify that administration of the MCAP Assessments has been completed at the following school according to MSDE security policies. All known security breaches and testing irregularities have been properly reported.

Fall Spring Summer Year _____

First Name	Last Name
School Name	School Organization Code
LEA Name	LEA Organization Code
Content/Administration Dates	Phone Number and Ext
Were any Forms to Report a Testing Irregularity or Security Breach submitted for the school? <input type="checkbox"/> Yes <input type="checkbox"/> No	
All secure test materials have been returned to Pearson. Any secure test materials not returned to Pearson have been tracked, destroyed and/or reported using the Form to Report Contaminated, Damaged, or Missing Materials.	
Ship back date	Number of scorable boxes shipped _____
	Number of nonscorable boxes shipped _____
Were any Forms to Report Contaminated, Damaged or Missing Materials submitted for the school? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Full Name (printed)	Date
School Test Coordinator Signature	
Principal (if different from above) Full Name (printed)	Date
Principal's Signature	