

SBAC Print on Demand Request

District: [Click here to enter text.](#) **School:** [Click here to enter text.](#) **School Year:** [Click here to enter text.](#)

Student Name: Click here to enter text.		SIMS: Click here to enter text.	Grade: Choose an item.
Special Ed Teacher: Click here to enter text.		Disability: Click here to enter text.	
<input type="checkbox"/> IEP	<input type="checkbox"/> 504 Plan		

Please provide an explanation for needing the Print on Demand. The explanation should include information from evaluations, present levels of performance, services and supports, and/or goals from the IEP.
Click here to enter text.

Assurances: Please check mark each assurance.

- I assure that the IEP or 504 plan indicates the state assessment will be provided via a print version.
- I assure that the Print on Demand has been enabled in TIDE.
- I assure that a certified staff will administer the assessment.
- I assure that a certified staff will act as a scribe, entering the student's information from the printer version of the item into the online delivery system.
- I assure that the certified staff acting as scribe has been trained according to the Scribe Protocol. (<http://doe.sd.gov/octe/SMARTERbalanced.aspx>)
- I assure that a location with a printer and shredder has been dedicated for printing and destruction of the assessment.
- I assure that a certified staff has been assigned to wait by the printer for the item, deliver the item to the student, and immediately shred the item once the answer has been entered into the online test delivery system.

Sped Director or 504 Coordinator

Date

Assessment Coordinator

Date

DUE: February 15, 2018

Please send originals to: Beth Schiltz, Program Specialist SD
DOE, Special Education
800 Governors Drive
Pierre, SD 57501

Note: Form content verification will be completed during onsite visits.