

Unique Accommodation Request Form

Instructions: If a student with a disability or an English learner requires an accommodation (i.e., a “unique accommodation”) that is not listed as an option on IEP, IAP or ELL form, and does not change the construct being measured by the test, the school may request approval for use of the accommodation using this request form. If approved, the accommodation must be listed in the Individualized Education Program (IEP) or 504 plan for a student with a disability; and an English Language Learner (ELL) plan, for an English learner.

To request approval for a unique accommodation, this form must be completed and submitted to assessment@la.gov **at least four weeks prior** to testing to ensure a timely state response is received. A copy of this form must be kept in the student’s IEP folder and, if appropriate, retained at the district office.

Contact information for educator requesting unique accommodation on behalf of student		
Name:	Date:	
School Name:	Phone Number:	
District/LEA Name:	Email:	
Student Information		
First Letter of Student’s First Name:		
First Three Letters of the Student’s Last Name:		
Day of Birth:	Grade:	Louisiana Secure ID:
Assessment Administration Information		
For which state assessments are you seeking approval to use the unique accommodation:		
Provide a brief description of the accommodation for which you are requesting approval:		
Describe the evidence that supports the need for this accommodation, including how it is used by the student in the classroom and on other assessments:		
Describe the planning needed for provision of this accommodation on tests (e.g., school staff, space, and/or specialized tools or equipment needed):		
<p>In submitting this form to LDOE for approval, the designee assures that:</p> <ul style="list-style-type: none"> • This accommodation will be documented in the student’s IEP, 504 plan, or LEP plan. • The school team has met and considered all listed accommodations before proposing this unique accommodation. • The proposed accommodation is used, as appropriate, for routine class instruction and assessment. 		

State (SEA) Use Only

Approval/Denial of Request (This completed section will be returned to your school prior to testing.)

This request has been approved.

This request has been denied.

State Staff Name and Position: _____

State Staff Signature: _____ Date: _____