*Sample Blank Internal Form*

MCAS Administration

Confirmation of Training Participation

and Receipt of Test Administrator’s Manuals (TAMs)

and Test Security Requirements

**Test administrators** must sign below to indicate they have attended their school’s MCAS training session and have received a copy of the MCAS TAM for the test they will be administering.

**Other school personnel who have access to secure materials** must sign below to indicate they have attended their school’s MCAS training session and have received a copy of the MCAS test security requirements (available for each administration at [www.doe.mass.edu/mcas/admin.html](http://www.doe.mass.edu/mcas/admin.html)).

Principals should retain this document in their school files for three years.

| **Date of Training** | **Time** | **Printed Name of Individual** | **Individual’s Role**  (e.g., Test Administrator, Test Coordinator, Hallway Monitor) | **Signature of Individual**  *By signing below, I acknowledge that*   1. *I am documenting my attendance at my school’s MCAS training session in proper test administration protocols and procedures.* 2. *I am receiving the MCAS TAM for the test I will administer or the MCAS test security requirements. I will read and understand the protocols in it, and I will abide by the terms specified within.* |
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