



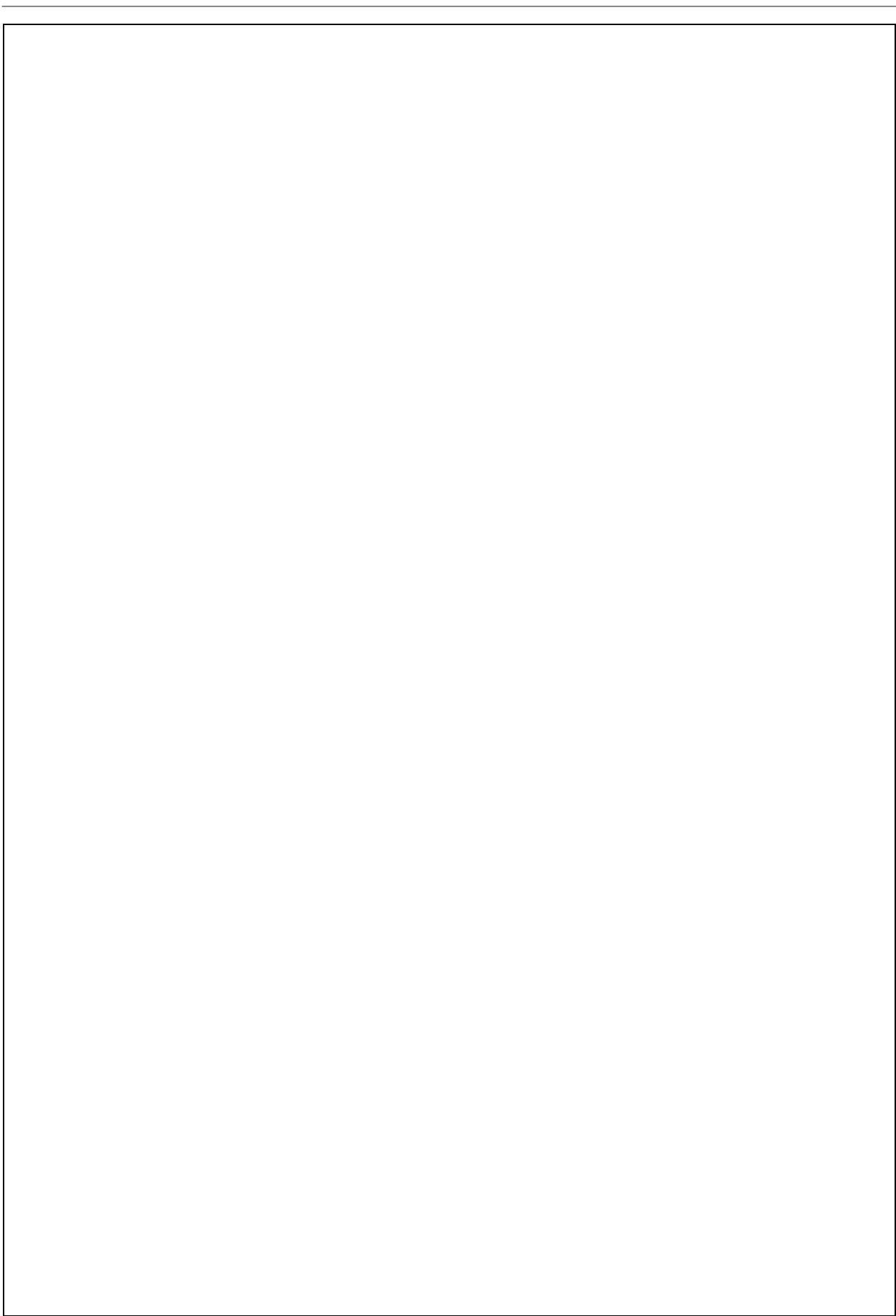
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STUDENT A

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**Please provide an overview of the assessment for districts and BOCES. Please include:**

- x A description of the assessment;**
- x A description of how the assessment is administered;**
- x A description of how scores are reported (include links to sample reports as appropriate);**
- x A description of how the Assessment Provider supports implementation of the assessment, including any technical assistance. (3 pages max)**



Knowledge Base, users may also submit a request for assistance from our School Support team either via email or using the Knowledge Base's "Live Chat" feature (available during business hours).

**Please provide an overview of the student5 ( st)-5.9 (uden6 (i): )Tj /TT11ai via emaøael .6 (**

Empty response box for the first question.

Empty response box for the second question.

	<p>areas. The item writers wrote, reviewed, and edited assessment materials. CBMreading passages are divided into Levels A, B and C, which correspond to 1<sup>st</sup>, 2<sup>nd</sup> and 3<sup>rd</sup> grade, and 4<sup>th</sup> to 6<sup>th</sup> grade reading levels, respectively. There are 39 Level A passages, 60 Level B, and 60 Level C passages. Those passages are assigned as screening forms for each grade level and a variety of progress monitoring forms, which are designed to administer the</p>

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**STUDENT ASSESSMENTS FOR  
TEACHER AND PRINCIPAL EVALUATION**

**FORM H**

**APPLICANT CERTIFICATION FORM –ASSESSMENTS FOR USE WITH STUDENT  
LEARNING OBJECTIVES**

Please read each of the items below and check the corresponding box to ensure the fulfillment of the technical criteria.


PLEASE SUBMIT ONE “FORM H” FOR EACH APPLICANT. CO-APPLICANTS SHOULD SUBMIT SEPARATE FORMS.

The Applicant makes the following assurances:


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To be completed by the Copyright Owner/Assessment Representative of the assessment being proposed and, where necessary, the co-applicant LEA :

<p><b>FastBridge Learning, LLC</b>                  1. Name of Organization (PLEASE PRINT/TYPE)</p>	 4. Signature of Authorized Representative (PLEASE USE BLUE INK)
<p><b>Terri Lynn Soutor</b>                  2. Name of Authorized Representative (PLEASE PRINT/TYPE)</p>	<p>- D Q X D U \ 8, 201                  5. Date Signed</p>
<p><b>Chief Executive Officer</b>                  3. Title of Authorized Representative (PLEASE PRINT/TYPE)</p>	

<p>1. Name of LEA (PLEASE PRINT/TYPE)</p>	<p>4. Signature of School Representative (PLEASE USE BLUE INK)</p>
<p>2. School Representative's Name (PLEASE PRINT/TYPE)</p>	<p>5. Date Signed</p>
<p>3. Title of School Representative (PLEASE PRINT/TYPE)</p>	