

Large Group Testing – Seating Chart Form
Kentucky State-Required Assessments

Complete one form for each room used during school test administration.
Keep on file at the school or district office.

Please check one assessment.

ACCESS for ELLs Alternate-KSA The ACT KSA Field Test/Other _____

Note: ACT administrators must use seating chart provided by ACT, Inc.

GENERAL INFORMATION

Test Date: _____ Room Number: _____
District Name: _____ School: _____
Grade Level: _____ Content: _____
Number of Testing Staff: _____ Number of Students Tested: _____

TEST ADMINISTRATOR

(Person(s) in charge of testing for this room)

Test Administrator Name (*Please Print*): _____

Test Administrator Signature: _____

PROCTOR

(Person(s) assisting test administrator by monitoring students or distributing materials.)

Proctor(s) Name(s)

(*Please Print*)

Proctor(s) Signature(s)

ROOM LAYOUT

Desks _____ **Tables** _____ **Students per Table** _____

The seating chart on the next page may be used as a reference to create an individual school chart. Make certain that the design reflects the room layout and includes student names.

