

Alachua County Public Schools, Gainesville, FL  
Exceptional Student Education  
**Waiver of State Standardized Assessment**

Section 1008.22(3)(c)(2), Florida Statutes (F.S.), states the following:

*“A student with a disability, as defined in s.1007.02 F.S., for whom the individual education plan (IEP) team determines that the statewide, standardized assessments under this section cannot accurately measure the student’s abilities, taking into consideration all allowable accommodations, shall have assessment results waived for the purpose of receiving a course grade and a high school diploma.”*

**SECTION ONE: STUDENT INFORMATION**

In order to be considered for the waiver from the State Standardized assessment requirement, the student must meet all of the following criteria:

1. Be identified as a student with a disability, as defined in s. 1007.02, F.S.
2. Have an active individual educational plan (IEP)
3. Have taken the statewide, standardized assessment with appropriate allowable accommodations at least once
4. Have demonstrated, as determined by the IEP team, achievement of the course standards

Student Name: \_\_\_\_\_ School: \_\_\_\_\_

Student ID Number: \_\_\_\_\_ Student Grade: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Date of IEP Team Meeting(s): \_\_\_\_\_

**Disability\*** (indicate all that apply):

- |   |   |
|---|---|
| <input type="checkbox"/> Orthopedic impairment (C)                  | <input type="checkbox"/> Specific learning disability (K) |
| <input type="checkbox"/> Speech impairment (F)                      | <input type="checkbox"/> Autism spectrum disorder (P)     |
| <input type="checkbox"/> Language impairment (G)                    | <input type="checkbox"/> Traumatic brain injury (S)       |
| <input type="checkbox"/> Hearing impairment, including deafness (H) | <input type="checkbox"/> Other health impairment (V)      |
| <input type="checkbox"/> Visual impairment, including blindness (I) | <input type="checkbox"/> Intellectual disability (W)      |
| <input type="checkbox"/> Emotional or behavioral disability (J)     |   |

*\* Letters are codes used to report students by exceptionality through the Department of Education’s automated student information system.*

**SECTION TWO: COURSE/ASSESSMENT PERFORMANCE**

Complete the boxes below and attach documentation of the following:

Course Code and Title: \_\_\_\_\_ Course Grade: \_\_\_\_\_

Statewide, Standardized Assessment Score: \_\_\_\_\_ Date of Administration: \_\_\_\_\_

Accommodations Provided:

- Flexible Time     Frequent Breaks     Flexible Setting     Paper-Based Administration     Oral Directions
- \_\_\_\_\_     \_\_\_\_\_     \_\_\_\_\_

**SECTION THREE: IEP TEA REVIEW**

Why does the statewide, standardized assessment not accurately measure the student’s abilities?

*(Check at least one Check all that apply)*

- The student received the follow accommodations in the classroom **that are not allowed on the statewide, standardized assessment but are indicated on the IEP:** *(describe or attach information)*

\_\_\_\_\_  
\_\_\_\_\_

