## Test Administration Guidance for Deaf and Hard of Hearing Students with Bluetooth Technology

This document provides guidance to local education agencies (LEAs) for students who are deaf and hard of hearing and will use cochlear implants or hearing aids that connect to Bluetooth technology while taking the New Jersey Student Learning Assessments (NJSLA) in English language arts (ELA), mathematics, and/or science, and the ELA and mathematics components of the New Jersey Graduation Proficiency Assessments (NJGPA).

### Presentation Accommodations: Cochlear Implants or Hearing Aids with Bluetooth Technology

Accommodation	Administration Guidelines				
Cochlear Implants/	Before Testing:				
Hearing Aids with	Identification for Student Registration/Personal Needs Profile (SR/PNP): Student's SR/PNP must have Adaptive				
Bluetooth	and Specialized Equipment or Furniture selected on the platform.				
Connection	Materials: Prior to testing, be sure all equipment is charged. Ensure that Bluetooth is enabled, and a strong				
	connection is established.				
	During Testing: If a student uses a Bluetooth-connected device, they are permitted to use it during testing. When reading				
	test directions aloud to the student, the Test Administrator (TA) must use the remote microphone if needed. While the				
	student is connected to their testing device, the student may not be able to access sound in their environment, and				
	therefore the TA will need to establish an appropriate communication process to gain the student's attention, if needed.				
	Important Note: Be aware of muting or unmuting the device appropriately.				

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Date of Request (mm/dd/yyyy):	Student Name: Testing Program:		SID:	Grade:
County/District/School Code (ccdddd-sss):				
Content Area (select all that apply): ELA	Math	Science		
Review of Cochlear Implant or Hearing Aids with	Bluetooth-Connecte	ed Device		
Name/Description of Bluetooth-Connected Device	e for Use with Cochle	ear Implants or Hearing Aids:		
The cochlear implants or hearing aids will be conn	ected directly to the	testing device via Bluetooth	connectivity.	
Procedure: The School Test Coordinator (STC), Te hearing aids to the test device via Bluetooth con			-	•
Deaf and Hard of Hearing Test Certification State	ement			
By completing this form, I hereby certify that I ha	ave fully complied w	ith the above-listed guidance		
District Test Coordinator:				
Print Name		Signature	Date (mm/dd/yyyy)	
School Test Coordinator:				
Print Name		Signature	Date (mm/dd/yyyy)	
Test Administrator:				
Print Name		Signature	Date (mm/dd/yyyy)	

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#### **Directions**

This form must be completed for any student who wears cochlear implants or hearing aids that connect to an externally approved testing device via Bluetooth technology.

The completion of this form ensures that a student has the necessary level of access to a Bluetooth device needed to manage access to the test materials during the administration of the NJSLA or NJGPA while at the same time maintaining the integrity, reliability, and validity of the test. The completed form will be reviewed and approved by the Office of Assessments.

Completed forms must be uploaded directly to PearsonAccess<sup>next</sup> (PAN) under Support Requests. Once the form has been successfully uploaded, the support request number must be emailed directly to the appropriate state assessment coordinator for review and approval. To upload the form to PAN, please ensure you have selected the correct administration scope (i.e., NJSLA/NJGPA-ELA/Math or NJSLA-Science) and follow the steps below:

- 1. Log into PAN and select "Support"
- 2. Select "Support Requests" from the drop-down menu.
- 3. Under "Select Tasks" click on "Create/Edit Requests" and then click on "Start".
- 4. Type the information in the required fields (i.e., Organization, Title, Category, Question/Concern). Under "Category" select "Other".
- 5. Click on "Choose Files" and select the file from your device to upload and then click on "Create".

After successfully uploading the form into PAN, you will be provided with a five-digit Support Request number. Please provide the five-digit Support Request number to the appropriate state assessment coordinator via email within five days of completion of testing. Do not attach an electronic copy of this document to any email communication initiated with state assessment coordinators to ensure student personally identifiable information (PII) is protected.