



NYSESLAT Testing Procedures

Important Dates



- Speaking - **April 15th – May 24th**
- Listening, Reading & Writing – **May 13th – May 24th**
- Make ups must be given during the testing window
- Return Answer Sheets to BOCES by **May 31st**

How to Get A Valid Score

NYSESLAT Students must be coded correctly in order to receive an answer sheet and to get a valid score.

- **An ELL eligible code of 0231 and an ELL Program code**
- **For first year ELL students only NYSESLAT code 0242 is required if taking NYSESLAT in lieu of ELA**
- **First year ELL students are students that have been in a US school for less than a year on April 1, 2024**

How to Get A Valid Score

- Students who are **absent** from **any** of the **4** testing sessions will receive an Overall Scale Score of “999” and an overall proficiency performance level of “99”
- **FOR KINDERGARTEN ONLY:**
 - Mod. 1: Listening
 - Mod. 2: Reading
 - Mod. 3: Writing
 - Speaking modality (administered individually)
- **Grades 1-12:**
 - Session 1: Theme 1 Listening/Reading/Writing
 - Session 2: Theme 2 Listening/Reading/Writing
 - Session 3: Theme 3 Listening/Reading/Writing
 - Speaking session (administered individually)



Prior to Testing



- Answer Sheets are ordered from Nassau BOCES using ASOFT.
- All NYSESLAT materials (except answer sheets) are ordered through the MetriTech.
- Contact MetriTech Customer Support at 1-800-747-4868 or email NYSESLAT@metritech.com for support.

Prior to Testing

- Can I make copies of test booklets if I am short?

No!

Prior to Testing

Materials will arrive in three different shipments

Shipment 1: (Week of April 8)

Speaking Subtest

Administration and Scoring materials

Shipment 2: (Week of May 6)

Listening, Reading & Writing Subtest

Administration materials (*All grade bands*)

Shipment 3: (Week of May 20)

Scoring materials for Writing Subtest (optional)

(*All grade bands*)



Testing Security:

Preserving the Integrity of the Test



- Store in a secure location.
- **Sealed packages (other than scoring materials for Speaking subtest) may not be removed from the secure location or opened until the day the test is to be administered.**
- Staff is not to discuss test questions or specific test content with each other, online via email or listserv or any other electronic means.

Prior to Testing

- Upon receipt of answer sheets, please review the class roster to make sure that all information is correct.
 - Do the rosters reflect the correct Level for each student?
 - Name spelling? Date of birth?
 - Missing students?
- Check your answer sheets to ensure that you have everything.
- Save the box the sheets came in. They are to be returned in the same box.
- Save count sheet. Return the count sheet with the answer sheets.

Class Roster

n a s s a u
BOCES **Class Roster**
Board of Cooperative Educational Services
NYSESLAT - Level 4

0000 District
000 Location/School

Date: _____

Grade: 05

Indicate "Tested" (T) or the "Not Tested" reason (Absent, etc.-see legend below).

For Science Only: Session 1 is Perf. Test and Session 2 is Written Test.

Return class rosters to your Test Scoring Coordinator.

Place barcode label on FRONT cover of the booklet.

*For Students without preprinted testing materials or booklet labels, follow steps 1-3.

1. In the shaded area on the answer sheet, write the student's first name, last name and correct ID#.

2. Fill in information from the corresponding extra answer sheet on the blank lines below.

3. For students without barcode labels, write student's first name, last name, school name and correct ID# on the back of the booklet.

| Pre-Printed Student ID | Student Name | Session 1 | | | | | Session 2 | | | | | Session 3 | | | | | | | |
|--|--------------|-----------|---|---|---|---|-----------|---|---|---|---|-----------|---|---|---|---|----------|---|---|
| | | ** | A | M | N | R | A | M | N | R | A | M | N | R | | | | | |
| 1)000000000 | Last, First | T | A | R | E | E | L | T | A | R | E | E | L | T | A | R | E | E | L |
| | | | | | | | | | | | | | | | | | | | |
| Total Number Of Students Listed | | | | | | | | | | | | | | | | | 1 | | |

* Enter information below for students who used extra answer sheets (Some fields may not apply)

| | | |
|---------------|-----------------|--------------------|
| 1) Name _____ | Actual ID _____ | DOB ____/____/____ |
| Sheet 1 _____ | Sheet 2 _____ | Sheet 3 _____ |
| 2) Name _____ | Actual ID _____ | DOB ____/____/____ |
| Sheet 1 _____ | Sheet 2 _____ | Sheet 3 _____ |
| 3) Name _____ | Actual ID _____ | DOB ____/____/____ |
| Sheet 1 _____ | Sheet 2 _____ | Sheet 3 _____ |
| 4) Name _____ | Actual ID _____ | DOB ____/____/____ |
| Sheet 1 _____ | Sheet 2 _____ | Sheet 3 _____ |
| 5) Name _____ | Actual ID _____ | DOB ____/____/____ |
| Sheet 1 _____ | Sheet 2 _____ | Sheet 3 _____ |

What Are Class Rosters Used For?

- Class Rosters can be used to verify which students are taking the exam.
- To check that data in Level 1 is correct.**
- Rosters let Nassau BOCES know who was not tested and why.
- Are used to track extra answer sheets.**

Testing Procedures

- If errors in spelling, DOB, or grade level are found:
 - **Advise your District Data Coordinator that this information needs to be corrected on the Student Information System.**
- Also, record any grade level changes on the class roster.
- Do not let a student take the assessment on the wrong level answer sheet. It will be a mis-administration.
- Check the Assessments by Birth Date/Age for Ungraded Special Education students in 2022- 23.

Grade Band / Levels

| GRADE | LEVEL |
|-------------------------|----------------|
| Kindergarten - K | Level 1 |
| Grade 1 | Level 2 |
| Grade 2 | Level 3 |
| Grade 3-4 | Level 4 |
| Grade 5-6 | Level 5 |
| Grade 7-8 | Level 6 |
| Grade 9-12 | Level 7 |

Assessments by Birth Date/Age for Ungraded Students in 2023–24

| Assessments | Birth Dates | Reaches this Age Between September 1, 2023 and August 31, 2024 |
|--------------------|-----------------------------------|--|
| Grade K: NYSESLAT | Any date after August 31, 2017 | 6 |
| Grade 1: NYSESLAT | September 1, 2016—August 31, 2017 | 7 |
| Grade 2: NYSESLAT | September 1, 2015—August 31, 2016 | 8 |
| Grade 3: NYSESLAT | September 1, 2014—August 31, 2015 | 9 |
| Grade 4: NYSESLAT | September 1, 2013—August 31, 2014 | 10 |
| Grade 5: NYSESLAT | September 1, 2012—August 31, 2013 | 11 |
| Grade 6: NYSESLAT | September 1, 2011—August 31, 2012 | 12 |
| Grade 7: NYSESLAT | September 1, 2010—August 31, 2011 | 13 |
| Grade 8: NYSESLAT | September 1, 2009—August 31, 2010 | 14 |
| Grade 9: NYSESLAT | September 1, 2008—August 31, 2009 | 15 |
| Grade 10: NYSESLAT | September 1, 2007—August 31, 2008 | 16 |
| Grade 11: NYSESLAT | September 1, 2006—August 31, 2007 | 17 |
| Grade 12: NYSESLAT | Born on or before August 31, 2006 | 18 |

Extra Answer Sheet

1. A pre-printed sheet was not available for the student.
 2. The pre-printed sheet was damaged or destroyed prior to test administration.
 3. The pre-printed sheet has the wrong grade level.
- ** If a child did not receive a pre-printed sheet, that child did not exist in the data warehouse at the time of printing or was incorrectly coded.**
- Advise your District Data Coordinator of the missing sheet so that the information can be entered into the Student System.***

When Using An Extra Answer Sheet

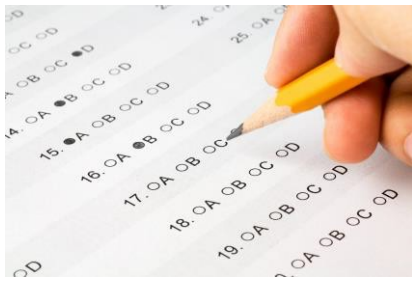
Only use blank answer sheets provided by Nassau BOCES

***DO NOT MAKE COPIES OF BLANK ANSWER SHEETS!**

***DO NOT USE ANOTHER STUDENT'S ANSWER SHEET!**

The bar code is the ID of that student. You will create multiple or incorrect records for a different student if you do this.

Extra answer sheets begin with: 89# # # # # # # #.
Sheet 1, Sheet 2, AND Sheet 3 do **not** have to match.



When Using An Extra Answer Sheet

- When using an extra answer sheet, all information in the heading should be filled out on the answer sheet in the **shaded area**.
 - Use the official 9-digit local student ID number on the answer sheet, including leading zeros.
 - Do not write above the line that says

“DO NOT WRITE IN THIS AREA”

DO NOT WRITE IN THIS AREA

----- Do not write above this line. -----

DO write in this shaded area!

MARKING INSTRUCTIONS: Make heavy BLACK marks. Erase cleanly. Make no stray marks.

USE A No. 2 PENCIL

CORRECT: ●

INCORRECT: ✓ ✗ ○ ●

IEP or 504 Plan Accommodations
(Fill in as many as apply.)

- ☐ Flexibility in scheduling (Timing N/A)
- ☐ Flexibility in setting
- ☐ Method of presentation (excluding Braille/Large type/Test read)
- ☐ Method of response
- ☐ Other
- ☐ Braille
- ☐ Large type
- ☐ Test read

Reason Not Tested

- ☐ Absent for entire test
- ☐ Refused to take entire test
- ☐ Administrative error, no score
- ☐ Not enrolled at time of test
- ☐ Medically excused

**NYS English as a Second Language Achievement Test
2024 NYSESLAT Grade K**

| Listening | | | | Reading | | | |
|--------------------------|-------------|---|-------------|--------------------------|-------------|---|-------------|
| PRINT Transcriber's Name | | Session Codes | | PRINT Transcriber's Name | | Session Codes | |
| | | <input type="radio"/> Absent Listening <input type="radio"/> Unable to respond | | | | <input type="radio"/> Absent Reading <input type="radio"/> Unable to respond | |
| 1 | (A) (B) (C) | 11 | (A) (B) (C) | 1 | (A) (B) (C) | 11 | (A) (B) (C) |
| 2 | (A) (B) (C) | 12 | (A) (B) (C) | 2 | (A) (B) (C) | 12 | (A) (B) (C) |
| 3 | (A) (B) (C) | 13 | (A) (B) (C) | 3 | (A) (B) (C) | 13 | (A) (B) (C) |

For Scanning Center
Use Only

Administering the Test

- **IN GRADES K, 1, & 2, STUDENTS WILL MARK THEIR ANSWERS IN THEIR TEST BOOKLETS.**
 - ✓ A TEACHER OR AIDE MUST TRANSCRIBE THE STUDENTS' RESPONSES ONTO THE MACHINE-SCORABLE ANSWER SHEETS **EXACTLY** AS THE STUDENTS RECORDED THEM IN THE TEST BOOKLETS. (Transcribers must put their names on answer sheets.)
- Students should use only **No. 2 pencil** to record their answers for the multiple-choice Listening, Reading, and Writing subtests.
- CR bubbles should also be recorded using a **No. 2 pencil**.









Reason Not Tested

Absent for Entire Test should be bubbled in AFTER Make-up window

Refused to take entire test. A student cannot refuse 1 part of the test. Any response will override refusal bubble

Accommodation Codes

| MARKING INSTRUCTIONS: Make heavy BLACK marks. Erase cleanly. Make no stray marks. | |
|--|---|
|  USE A No. 2 PENCIL | CORRECT:  INCORRECT:     |
| IEP or 504 Plan Accommodations (Fill in as many as apply.) | Reason Not Tested |
| <input type="radio"/> Flexibility in scheduling (Timing N/A) | <input type="radio"/> Absent for entire test |
| <input type="radio"/> Flexibility in setting | <input type="radio"/> Refused to take entire test |
| <input type="radio"/> Method of presentation (excluding Braille/Large type/Test read) | <input type="radio"/> Administrative error, no score |
| <input type="radio"/> Method of response | <input type="radio"/> Not enrolled at time of test |
| <input type="radio"/> Other | <input type="radio"/> Medically excused |
| <input type="radio"/> Braille | |
| <input type="radio"/> Large type | |
| <input type="radio"/> Test read | |

NYSESLAT Answer Sheet

TS8242 District Student ID CD School Level Page 1 Form

MARKING INSTRUCTIONS: Make heavy BLACK marks. Erase cleanly. Make no stray marks.

USE A No. 2 PENCIL

CORRECT: ● INCORRECT: ✗

IEP or 504 Plan Accommodations
(Fill in as many as apply.)

- ☐ Flexibility in scheduling (Timing N/A)
- ☐ Flexibility in setting
- ☐ Method of presentation (excluding Braille/Large type/Test read)
- ☐ Method of response
- ☐ Other
- ☐ Braille
- ☐ Large type
- ☐ Test read

Reason Not Tested

- ☐ Absent for entire test
- ☐ Refused to take entire test
- ☐ Administrative error, no score
- ☐ Not enrolled at time of test
- ☐ Medically excused

NYS English as a Second Language Achievement Test
2024 NYSESLAT Grade K

Listening

| PRINT Transcriber's Name | Session Codes |
|--------------------------|---|
| | <input type="radio"/> Absent Listening <input type="radio"/> Unable to respond |
| 1 | A B C |
| 2 | A B C |
| 3 | A B C |
| 4 | A B C |
| 5 | A B C |
| 6 | A B C |
| 7 | A B C |
| 8 | A B C |
| 9 | A B C |
| 10 | A B C |
| 11 | A B C |
| 12 | A B C |
| 13 | A B C |
| 14 | A B C |
| 15 | A B C |
| 16 | A B C |
| 17 | A B C |
| 18 | A B C |
| 19 | A B C |

Reading

| PRINT Transcriber's Name | Session Codes |
|--------------------------|---|
| | <input type="radio"/> Absent Reading <input type="radio"/> Unable to respond |
| 1 | A B C |
| 2 | A B C |
| 3 | A B C |
| 4 | A B C |
| 5 | A B C |
| 6 | A B C |
| 7 | A B C |
| 8 | A B C |
| 9 | A B C |
| 10 | A B C |
| 11 | A B C |
| 12 | A B C |
| 13 | A B C |
| 14 | A B C |
| 15 | A B C |
| 16 | A B C |
| 17 | A B C |
| 18 | A B C |

For Scanning Center Use Only

Print Transcriber's Name Only for Grades K, 1 and 2 Listening and Reading

K

Scantron DE EliteView™ W-295881-10-654321

NYSESLAT Answer Sheet

TS8242 District Student ID CD School Level Page 1 Form

MARKING INSTRUCTIONS: Make heavy BLACK marks. Erase cleanly. Make no stray marks.

USE A No. 2 PENCIL CORRECT: INCORRECT: ✓ X

IEP or 504 Plan Accommodations
(Fill in as many as apply.)

- ☐ Flexibility in scheduling (Timing N/A)
- ☐ Flexibility in setting
- ☐ Method of presentation (excluding Braille/Large type/Test read)
- ☐ Method of response
- ☐ Other
- ☐ Braille
- ☐ Large type
- ☐ Test read

Reason Not Tested

- ☐ Absent for entire test
- ☐ Refused to take entire test
- ☐ Administrative error, no score
- ☐ Not enrolled at time of test
- ☐ Medically excused

NYS English as a Second Language Achievement Test
2024 NYSESLAT Grade K

| Listening | | Reading | |
|--------------------------|---|--------------------------|---|
| PRINT Transcriber's Name | Session Codes | PRINT Transcriber's Name | Session Codes |
| | <input type="checkbox"/> Absent Listening <input type="checkbox"/> Unable to respond | | <input type="checkbox"/> Absent Reading <input type="checkbox"/> Unable to respond |
| 1 A B C | 11 A B C | 1 A B C | 11 A B C |
| 2 A B C | 12 A B C | 2 A B C | 12 A B C |
| 3 A B C | 13 A B C | 3 A B C | 13 A B C |
| 4 A B C | 14 A B C | 4 A B C | 14 A B C |
| 5 A B C | 15 A B C | 5 A B C | 15 A B C |
| 6 A B C | 16 A B C | 6 A B C | 16 A B C |
| 7 A B C | 17 A B C | 7 A B C | 17 A B C |
| 8 A B C | 18 A B C | 8 A B C | 18 A B C |
| 9 A B C | 19 A B C | 9 A B C | |
| 10 A B C | | 10 A B C | |

Scanton DE EliteView™ W-295881-18/554321

Unable to Respond
applies to
Level 1 (K) Only

For Scanning Center
Use Only

K

Back of Page 1

Be sure each item for Speaking and Writing has a score bubble

No Response bubble is not available for speaking, but it is available for writing.

Skipping Rule (SIRS)

Each session has its own Absent bubble

Print Scorers' Code Letters

Print Scorers' Names in box

TS8228 ■ ■ ■ Page 2

2023 NYSESLAT Grade K

FOR TEACHER USE ONLY

MARKING INSTRUCTIONS: Make heavy BLACK marks. Erase cleanly. Make no stray marks.

USE A No. 2 PENCIL ■ CORRECT: ● INCORRECT: ✗

| Speaking | | | | Writing | | | |
|----------------------|-----------------|---------|--|----------------|--------------|-------------|--|
| Scorer's Code Letter | Session Codes | | | Session Codes | | | |
| | Absent Speaking | | | Absent Writing | | | |
| Question | Score Points | Skipped | | Question | Score Points | No Response | |
| 1 | 0 1 | | | 1 | 0 1 | 2 | |
| 2 | 0 1 2 | | | 2 | 0 1 | 2 | |
| 3 | 0 1 2 | 3 | | 3 | 0 1 | 2 | |
| 4 | 0 1 2 | 3 | | 4 | 0 1 2 | 3 | |
| 5 | 0 1 | | | 5 | 0 1 2 | 3 | |
| 6 | 0 1 2 | 3 | | 6 | 0 1 2 | 3 | |
| 7 | 0 1 2 | 3 | | 7 | 0 1 2 | 3 | |
| 8 | 0 1 2 | 3 | | 8 | 0 1 2 3 | 4 | |
| 9 | 0 1 | | | | | | |
| 10 | 0 1 2 | | | | | | |
| 11 | 0 1 2 | 3 | | | | | |
| 12 | 0 1 2 | 3 | | | | | |

Fill in the method used to score your school's test papers. (Select only one.)

Scoring Model Code

1 Regional scoring
 2 Schools from two districts
 3 Three or more schools within a district
 4 Two schools within a district
 5 One school
 6 Scored by a private contractor (not a SOCES)

| Code Letters | Print Scorers' Names |
|--------------|----------------------|
| A | |
| B | |
| C | |
| D | |
| E | |

K

Skipping Rule

From the SIRS Manual

Skipping Rule For Speaking Only

The Skipping Rule applies to the questions where indicated on the answer sheet.

Skipped questions will have an “S” darkened-in. When the vendor is scoring, the vendor will treat the “S” as a zero when calculating a Speaking Modality score.

After Testing

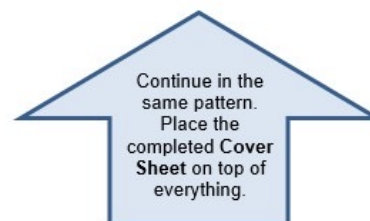
1. Bubble in Testing Accommodations on the answer sheets if applicable.
2. **Confirm that the number of answer sheets is the same as the number of booklets.**
3. If an 'extra' sheet is used, make sure **the official 9 digit local student ID #** is added to the answer sheet within the shaded area and also add the student to the class list.
4. Collect answer sheets immediately after completing Reading Subtest. The students cannot have access to their answer sheet while they do the Writing Subtest.
5. **During the scoring process, verify that the Speaking and Writing Subtest scores have been filled in. NOTE: If score is “zero” this MUST also be bubbled in.**

Returning Answer Sheets

- No “**extra**” **unused** answer sheets should be returned.
- **All pre-printed sheets must be returned** either **completed** or with a “**reason not tested**” bubbled in.
- Damaged sheets should have responses & scores copied onto an extra answer sheet. Fill in all missing information, and retain the original.
- **No post-it notes, paper clips, staples or stray marks should be left on the answer sheet.**
- **Nothing should be obscuring bubbled answers or bar codes.**
- **Check that ALL constructed responses have been bubbled.**

Please note that only Sheet 1 has a place to bubble "Reason Not Tested." However, it is important to have both answer sheets scanned for all students. Kindly submit both answer sheets for all students – see diagram.

| |
|--|
| Grades 3-4 – Class Rosters with corrections |
| Grades 3-4– Sheet 1 Student Ans. Sheets w/ "Reason Not Tested" |
| Grades 3-4 – Sheet 1 |
| All Used Extra Student Answer Sheets |
| Grades 3-4 – Sheet 1 |
| All Used Answer Documents |
| Grades 3-4 – Sheet 2 Student Ans. Sheets w/ "Reason Not Tested" |
| Grades 3-4 – Sheet 2 |
| All Used Extra Student Answer Sheets |
| Grades 3-4 – Sheet 2 |
| All Used Answer Documents |
| Grades 3-4 – Sheet 3 Student Ans. Sheets w/ "Reason Not Tested" |
| Grades 3-4 – Sheet 3 |
| All Used Extra Student Answer Sheets |
| Grades 3-4 – Sheet 3 |
| All Used Answer Documents |
| Grades 1-2 – Class Rosters with corrections |
| Grades 1-2 – Sheet 1 Student Ans. Sheets w/ "Reason Not Tested" |
| Grades 1-2 – Sheet 1 |
| All Used Extra Student Answer Sheets |
| Grades 1-2 – Sheet 1 |
| All Used Answer Documents |
| Kindergarten – Class Roster with corrections |
| Kindergarten – Sheet 1 Student Ans. Sheets w/ "Reason Not Tested" |
| Kindergarten – Sheet 1 |
| All Used Extra Student Answer Sheets |
| Kindergarten – Sheet 1 |
| All Used Answer Documents |



- Package by District, not by school.
- Place the completed cover sheet on top of everything.
- Put a blank sheet of colored paper between Sheet 1 Sheet 2 and sheet 3 stacks.
- Place all answer documents in the same direction.
- Answer documents do not have to be in alpha or class order.

After Testing, cont'd

**Return answer sheets and count sheet
on or before May 31st**

**Nassau BOCES
One Merrick Ave.
Westbury, NY 11590**



- **Use the box provided for you. If that box is lost or damaged, please notify us.**

Nassau BOCES Cover Sheet For Answer Documents - Please Print All Information

- The cover sheet lists two numbers. The first is under the heading “School Count” and is filled out by the school. The “BOCES Count” is completed by BOCES.
- **These numbers must match.** You will be called and/or emailed to resolve any discrepancies. **All student data must be sent via secure data transfer.**

| GRADE | School Count | | |
|--------------------------|--------------|---------|---------|
| | Sheet 1 | Sheet 2 | Sheet 3 |
| Band 1 (Kindergarten) | | | |
| Band 2 (Gr. 1) | | | |
| Band 3 (Gr. 2) | | | |
| Band 4 (Gr. 3 & 4) | | | |
| Band 5 (Gr. 5 & 6) | | | |
| Band 6 (Gr. 7 & 8) | | | |
| Band 7 (Gr. 9 - 12) | | | |

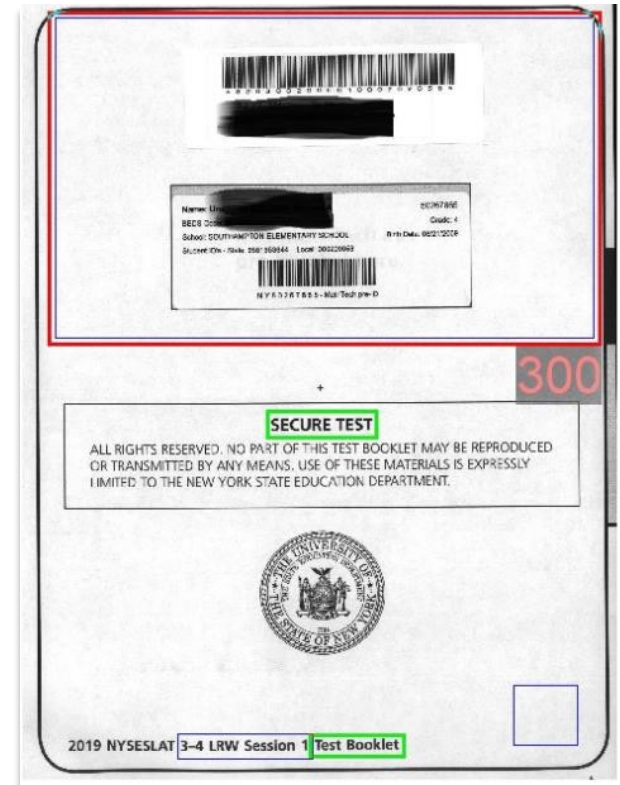
Returning Testing Materials

- Schools must return all secure test materials to MetriTech.
- **These include all used and unused test booklets (regular, large-type, and braille editions), Directions for Administration, scoring guides, and pre-recorded Listening CDs supplied by MetriTech.**
- Prepaid address labels for returning all test materials are provided by MetriTech.

Preparing NYSESLAT Test Booklets For OSCWorld

- ▶ Place “Listening/Reading/Writing” Session booklets 1, 2, & 3 one after another for each student.
- ▶ Example: John Smith book 1, 2, 3, Sara Samson book 1,2,3, etc.
- ▶ Place booklets in rubber bands in packs of 25 students (75 booklets) each. (If you have a group less than 25 just label with a post – it note.)
- ▶ If a student did NOT participate and all three booklets are blank, please do not submit any of them. Make sure however that that answer sheet’s absent, refused, or reason not tested bubble(s) are filled in.
- ▶ If a student took 1 or more of the booklets, you must submit all 3.
- ▶ OSCWorld labels must be affixed to the back of the NYSESLAT booklet/s.

Special Note: Kindergarten: Only the Writing booklet 1 is submitted.



Thank You!

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