

State of Texas
County of Hidalgo



Texas Education Agency
Student Assessment Program

Testing Department
2024-2025

Oath of Test Security and Confidentiality for Technology Personnel

I do hereby certify, warrant, and affirm that I will fully comply with all applicable requirements governing the State Assessment Programs and do hereby certify the following (*by initialing each statement*):

_____ I have received training in test security and confidentiality requirements.

_____ I understand that student information is confidential and that I am obligated to maintain and preserve the confidentiality of this information.

_____ I am aware of my obligation to report any suspected violations of test security to the District Testing Director, Ms. Ofelia Alvarez, at (956) 461-8020

_____ I am aware that release or disclosure of confidential test items or information could result in prosecution under the Texas Education Code, Government Code, and Administrative Code, and/or Penal Code.

I do hereby further certify, warrant, and affirm that I will comply with all requirements concerning test security and confidentiality.

_____ Date _____ Campus 108-902
County-District Number

Printed Name of Employee

Signature of Employee

Return this form to the Testing Department.