Attach extra pages as required.

Note: You may attach your roster to this form instead of writing the information below, only if it includes the type of ID.

Type of ID
P = Photo ID
F = ACT Student Identification Form
R and Staff Initials = Recognized
— = Absent

Examinee's Name (please print) List all examinees **scheduled** to test in this room.	Mark attendance by noting type of ID.			
	P	**F**	**R** and Initials	**—**
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

OPS1352

Important! All examinees assigned to this room must have the same Timing Code. More than one Timing Code in a room will result in canceled scores.

ACT High School Code ___ ___ ___ ___ ___ ___   State _____   Type: ☐ No Writing   ☐ Writing

School Name _____   Test Date _____

Room Supervisor _____   Room _____

☐ Testing at school   ☐ Testing off-site—provide off-site location name and address:

Location Name _____

Address/City _____

Number of Examinees Seated in This Room _____   Number of Staff in This Room _____
If two or more, complete the Seating Diagram.   If two or more, enter names of proctors.

Proctors _____

Test Coordinator—After testing, mark (✓) as you confirm counts and completeness/correctness of documents that apply to this room.

Student Authorization Tickets	Used Scratch Paper	Test Room Report	Seating Diagram	TC6 Progression Report	Roster	ACT ID Forms
☐	☐	☐	☐	☐	☐	☐

Test Coordinator—Return this completed folder in the RED envelope. Do not separate the pages.

Instructions:

If…	Then…
All tests are completed in one sitting	• Complete one folder for the sitting
Testing a single examinee over multiple days	• Complete one folder that covers all the sittings for that examinee
	• Record all the tests for that examinee on one Administration Report
Testing a group of examinees with the same timing code over multiple days	• Complete one folder that covers all the sittings for that group
	• Record all the tests for all examinees in the group on one Administration Report

For multiple day testing, the folder assumes all examinees listed on the Administration Report take all tests at the same time, in the same room, with the same staff. If that is not the case, do the following:

• Complete an Irregularity Report **for each affected sitting**. Include the names of the examinees in that sitting, date and time, room name (and location if off-site), and names of staff.

• If there is a room change with more than one examinee in the room, also complete a seating diagram for the other room and attach it to the original folder or to the Irregularity Report.

A01190001700

The ACT — Seating Diagram

Instructions:

- Complete blocks 1 through 4 during testing.
- In block 4, sketch the room setup and enter the name of each examinee to indicate the workstation where he or she is seated. Show the direction examinees are facing, any partitions/dividers, and walls.

See the *Administration Manual* for acceptable seating arrangements.

1 — Seating Type

- ☐ Desks
- ☐ Tables
- ☐ Carrels
- ☐ Other _____

2 — Partitions between Examinees

☐ Yes   ☐ No

3 — Distance between Examinees

Shoulder-to-Shoulder: _____ ft.

Minimum 3 ft.

Head-to-Head: _____ ft.

Minimum 5 ft. if no partitions

4 — Diagram of Room Setup and Seating

Timing Code 6–Examinee Progression Report

Instructions:

- Enter each examinee's name.
- Place a checkmark in the "W" column if the examinee is taking the ACT with writing.
- Record each examinee's actual start and stop times for each test.
- Enter the "must stop by" times for ACT (no writing) and ACT with writing.

Notes:

- This progression report is completed for Timing Code 6 only.
- All examinees start Test 1 at the same time, then work at their own pace.
- Do NOT stop timing during breaks.
- See the *Administration Manual* for complete timing instructions.

ACT (no writing) examinees must STOP by: _____ (Exactly 5 hours from the START of Test 1)

ACT with writing examinees must STOP by: _____ (Exactly 6 hours from the START of Test 1)

W	Student Name	Test 1 START	Test 1 STOP	Test 2 START	Test 2 STOP	Test 3 START	Test 3 STOP	Test 4 START	Test 4 STOP	Writing START	Writing STOP
✓	Sample, James	8:30	9:38	9:44	10:56	11:08	12:03	12:11	1:13	1:20	2:02

Is there an Irregularity Report regarding timing?   ☐ Yes   ☐ No