

# ACT WorkKeys Report of Accommodated Tests

## Instructions

For each accommodated assessment, the test coordinator should complete this form and keep it for your records for one year.

Examinee Name (printed)	Examinee ID
Test Site Name	City / State
Test Coordinator Name (printed)	Date

No system accommodations other than extended time are currently permissible with ACT WorkKeys online testing. If you have examinees that need other accommodations, (e.g. readers), they must test using paper materials. Call ACT to order such materials. In the space below, describe the examinee's disability.

For each assessment administered, give the test date and check the appropriate extended time given. Note the type of written documentation provided in the Describe Accommodations field.

Name of Assessment	Date Administered	Describe Accommodations	Time-and-a-half	Double-time	3 hours
Workplace Documents					
Applied Math					
Graphic Literacy					
Business Writing					
Applied Technology					
Workplace Observation					

The signatures below signify that:

- The examinee has the specified disability.
- The accommodations indicated above have been provided.

Examinee Signature	Date
Test Coordinator Signature	Date

**Keep a copy for your records for one year.**