

NRS Approved ABE Assessments - CASAS		
GOALS	Reading 901,902,903,904,905,906,907,908	Math 913,914,917,918

Student Name: _____

CASAS

Test Date	Instrument Name/ Version	Subtest	Form/ Level	Score	Staff Initials	Invalidate assessment	Report this assessment
	<input type="checkbox"/> GOALS - Paper Based <input type="checkbox"/> GOALS - Computer Based in Person <input type="checkbox"/> GOALS - Computer Based Remote	Reading					
	<input type="checkbox"/> GOALS - Paper Based <input type="checkbox"/> GOALS - Computer Based in Person <input type="checkbox"/> GOALS - Computer Based Remote	Math					

Test Date	Instrument Name/ Version	Subtest	Form/ Level	Score	Staff Initials	Invalidate assessment	Report this assessment
	<input type="checkbox"/> GOALS - Paper Based <input type="checkbox"/> GOALS - Computer Based in Person <input type="checkbox"/> GOALS - Computer Based Remote	Reading					
	<input type="checkbox"/> GOALS - Paper Based <input type="checkbox"/> GOALS - Computer Based in Person <input type="checkbox"/> GOALS - Computer Based Remote	Math					

Test Date	Instrument Name/ Version	Subtest	Form/ Level	Score	Staff Initials	Invalidate assessment	Report this assessment
	<input type="checkbox"/> GOALS - Paper Based <input type="checkbox"/> GOALS - Computer Based in Person <input type="checkbox"/> GOALS - Computer Based Remote	Reading					
	<input type="checkbox"/> GOALS - Paper Based <input type="checkbox"/> GOALS - Computer Based in Person <input type="checkbox"/> GOALS - Computer Based Remote	Math					

Test Date	Instrument Name/ Version	Subtest	Form/ Level	Score	Staff Initials	Invalidate assessment	Report this assessment
	<input type="checkbox"/> GOALS - Paper Based <input type="checkbox"/> GOALS - Computer Based in Person <input type="checkbox"/> GOALS - Computer Based Remote	Reading					
	<input type="checkbox"/> GOALS - Paper Based <input type="checkbox"/> GOALS - Computer Based in Person <input type="checkbox"/> GOALS - Computer Based Remote	Math					

NRS Approved ESL Assessments - CASAS

Life and Work Reading 27,28,81,82,81X,82X,83,84,85,86,185,186,187,188 **Listening** 981,982,983,984,985,986

Student Name: _____

CASAS

Test Date	Instrument Name/ Version	Subtest	Form/ Level	Score	Staff Initials	Invalidate assessment	Report this assessment
	<input type="checkbox"/> Life and Work - Paper Based <input type="checkbox"/> Life and Work - Computer Based in Person <input type="checkbox"/> Life and Work - Computer Based Remote	Reading					
	<input type="checkbox"/> Life and Work - Paper Based <input type="checkbox"/> Life and Work - Computer Based in Person <input type="checkbox"/> Life and Work - Computer Based Remote	Listening					

Test Date	Instrument Name/ Version	Subtest	Form/ Level	Score	Staff Initials	Invalidate assessment	Report this assessment
	<input type="checkbox"/> Life and Work - Paper Based <input type="checkbox"/> Life and Work - Computer Based in Person <input type="checkbox"/> Life and Work - Computer Based Remote	Reading					
	<input type="checkbox"/> Life and Work - Paper Based <input type="checkbox"/> Life and Work - Computer Based in Person <input type="checkbox"/> Life and Work - Computer Based Remote	Listening					

Test Date	Instrument Name/ Version	Subtest	Form/ Level	Score	Staff Initials	Invalidate assessment	Report this assessment
	<input type="checkbox"/> Life and Work - Paper Based <input type="checkbox"/> Life and Work - Computer Based in Person <input type="checkbox"/> Life and Work - Computer Based Remote	Reading					
	<input type="checkbox"/> Life and Work - Paper Based <input type="checkbox"/> Life and Work - Computer Based in Person <input type="checkbox"/> Life and Work - Computer Based Remote	Listening					

Test Date	Instrument Name/ Version	Subtest	Form/ Level	Score	Staff Initials	Invalidate assessment	Report this assessment
	<input type="checkbox"/> Life and Work - Paper Based <input type="checkbox"/> Life and Work - Computer Based in Person <input type="checkbox"/> Life and Work - Computer Based Remote	Reading					
	<input type="checkbox"/> Life and Work - Paper Based <input type="checkbox"/> Life and Work - Computer Based in Person <input type="checkbox"/> Life and Work - Computer Based Remote	Listening					

NRS Approved Assessments TABE 11/12
Forms 11 and 12 Paper and Pencil & Online – Reading, Math, Language

Student Name: _____

TABE 11/12

Test Date	Instrument/ Version	Subtest	Form	Level: L,E,M,D,A	Score	Staff Initials	Invalidate assessment	Report this assessment
	<input type="checkbox"/> Paper/Pencil <input type="checkbox"/> Online - In Person <input type="checkbox"/> Online - Remote	Reading	<input type="checkbox"/> 11 <input type="checkbox"/> 12					
	<input type="checkbox"/> Paper/Pencil <input type="checkbox"/> Online - In Person <input type="checkbox"/> Online - Remote	Math	<input type="checkbox"/> 11 <input type="checkbox"/> 12					
	<input type="checkbox"/> Paper/Pencil <input type="checkbox"/> Online - In Person <input type="checkbox"/> Online - Remote	Language	<input type="checkbox"/> 11 <input type="checkbox"/> 12					

Test Date	Instrument/ Version	Subtest	Form	Level: L,E,M,D,A	Score	Staff Initials	Invalidate assessment	Report this assessment
	<input type="checkbox"/> Paper/Pencil <input type="checkbox"/> Online - In Person <input type="checkbox"/> Online - Remote	Reading	<input type="checkbox"/> 11 <input type="checkbox"/> 12					
	<input type="checkbox"/> Paper/Pencil <input type="checkbox"/> Online - In Person <input type="checkbox"/> Online - Remote	Math	<input type="checkbox"/> 11 <input type="checkbox"/> 12					
	<input type="checkbox"/> Paper/Pencil <input type="checkbox"/> Online - In Person <input type="checkbox"/> Online - Remote	Language	<input type="checkbox"/> 11 <input type="checkbox"/> 12					

Test Date	Instrument/ Version	Subtest	Form	Level: L,E,M,D,A	Score	Staff Initials	Invalidate assessment	Report this assessment
	<input type="checkbox"/> Paper/Pencil <input type="checkbox"/> Online - In Person <input type="checkbox"/> Online - Remote	Reading	<input type="checkbox"/> 11 <input type="checkbox"/> 12					
	<input type="checkbox"/> Paper/Pencil <input type="checkbox"/> Online - In Person <input type="checkbox"/> Online - Remote	Math	<input type="checkbox"/> 11 <input type="checkbox"/> 12					
	<input type="checkbox"/> Paper/Pencil <input type="checkbox"/> Online - In Person <input type="checkbox"/> Online - Remote	Language	<input type="checkbox"/> 11 <input type="checkbox"/> 12					

NRS Approved Assessments BEST
 BEST Literacy Forms B, C, D
 BEST Plus 2.0 Paper D, E, F or Computer Adaptive

Student Name: _____

BEST/BEST Plus

Test Date	Instrument/ Version	Subtest	Form	Score	Staff Initials	Invalidate assessment	Report this assessment
	Updated Literacy	N/A	<input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D				
	BEST Plus 2.0 <input type="checkbox"/> Paper - In Person <input type="checkbox"/> Paper - Remote <input type="checkbox"/> Computer Adaptive - In Person <input type="checkbox"/> Computer Adaptive - Remote	N/A	(Paper only) <input type="checkbox"/> D <input type="checkbox"/> E <input type="checkbox"/> F				

Test Date	Instrument/ Version	Subtest	Form	Score	Staff Initials	Invalidate assessment	Report this assessment
	Updated Literacy	N/A	<input type="checkbox"/> B <input type="checkbox"/> C D				
	BEST Plus 2.0 <input type="checkbox"/> Paper - In Person <input type="checkbox"/> Paper - Remote <input type="checkbox"/> Computer Adaptive - In Person <input type="checkbox"/> Computer Adaptive - Remote	N/A	(Paper only) <input type="checkbox"/> D <input type="checkbox"/> E <input type="checkbox"/> F				

Test Date	Instrument/ Version	Subtest	Form	Score	Staff Initials	Invalidate assessment	Report this assessment
	Updated Literacy	N/A	<input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D				
	BEST Plus 2.0 <input type="checkbox"/> Paper - In Person <input type="checkbox"/> Paper - Remote <input type="checkbox"/> Computer Adaptive - In Person <input type="checkbox"/> Computer Adaptive - Remote	N/A	(Paper only) <input type="checkbox"/> D <input type="checkbox"/> E <input type="checkbox"/> F				