

Observer Verification Form

The Observer Verification Form is to be submitted if the only evidence provided is a data collection sheet or graph. Please complete all of the information on this document to qualify this evidence to be scored. Incomplete information may preclude a reportable score for the student.

NOTE: Use one form for all data points if the same person is the observer for all three data points, or different forms if different observers.

Teacher completes this section:

Student's Name: _____	Dates of Student Performance: _____/_____/_____ _____/_____/_____ _____/_____/_____
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Reading Mathematics Writing Science

Extension Code: _____

Extension: _____

Brief description of activity and desired student response:

Observer completes this section:

Observer Name: _____ (cannot be the same person collecting data)

I hereby certify the assessment task indicated above was conducted in my presence as described.

OBSERVER'S SIGNATURE

DATE

Observer Title/Position:

- Teacher
- Paraprofessional/Aide
- Administrator
- School Psychologist
- Related Service Provider
- Nurse
- Other certified or licensed professional