

STAAR ALTERNATE 2 PARTICIPATION REQUIREMENTS



Student Name: _____ Grade: _____ Date: _____

Name of District Personnel Completing Form: _____ Position: _____

Background and Instructions

Prior to reviewing the participation requirements for the State of Texas Assessments of Academic Readiness (STAAR®) Alternate 2, the admission, review, and dismissal (ARD) committee must understand all assessment options, including the characteristics of each assessment and the potential implications of each assessment choice. STAAR Alternate 2 is a statewide assessment that may only be considered for students with the most significant cognitive disabilities. A student with the most significant cognitive disability is a student who exhibits significant intellectual and adaptive behavior deficits in their ability to plan, comprehend, and reason, and also who indicates adaptive behavior deficits that limit his or her ability to apply social and practical skills (e.g., personal care, social problem-solving skills, dressing, eating, using money) across all life domains. The student requires extensive, direct, individualized instruction and needs substantial supports that are neither temporary nor specific to a particular content area.

If STAAR Alternate 2 is being considered, the ARD committee must review these participation requirements against the supporting documentation within the individualized education program (IEP), such as in the present levels of academic achievement and functional performance (PLAAFP), to determine eligibility. If it is determined that the student meets the participation requirements for STAAR Alternate 2, this form and supporting IEP documentation may serve as the required IEP statement under [19 Texas Administrative Code \(TAC\) 89.1055\(b\)](#) and must be available for review during cyclical and targeted monitoring.

STEP I: DETERMINE IF STAAR ALTERNATE 2 PARTICIPATION REQUIREMENTS SHOULD BE REVIEWED

1. The student meets eligibility for special education and related services due to a specific learning disability (SLD).

- Yes
 No



If Yes is marked, stop here. The student does not meet the eligibility criteria as a student with a significant cognitive disability per 34 Code of Federal Regulations (CFR) §300.8(c)(10)(ii): An SLD “does not include learning problems that are primarily the result of visual, hearing, or motor disabilities, of intellectual disability, of emotional disturbance, or of environmental, cultural, or economic disadvantage.”

2. The student meets eligibility for special education and related services due to a speech impairment (SI), which is the ONLY disability designation.

- Yes
 No



If Yes is marked, stop here. The student does not meet the eligibility criteria as a student with a significant cognitive disability per 34 CFR §300.8(c)(11): An SI “means a communication disorder, such as stuttering, impaired articulation, a language impairment, or a voice impairment that adversely affects a child’s educational performance.”

STEP II: DETERMINE IF THE STUDENT HAS THE MOST SIGNIFICANT COGNITIVE DISABILITY

Review the criteria in each row below regarding the student’s access to enrolled grade-level curriculum and adaptive behavior skills and check the box that is most applicable to the student. One box must be checked in each of the eight rows. If after reviewing all available data the committee is struggling to decide between Column 1 and Column 2, presume competence and select the criteria in Column 1.

The student’s IEP documents the following:	
COLUMN 1	COLUMN 2
<input type="checkbox"/> Academic goals aligned to enrolled grade-level Texas Essential Knowledge and Skills (TEKS) with accommodations or modifications in some or all content areas	<input type="checkbox"/> Academic goals aligned to prerequisite skills significantly below enrolled grade-level TEKS in ALL content areas
<input type="checkbox"/> Routinely participates in traditional methods of assessment (e.g., multiple-choice, short answer, essay) with or without individualized support (e.g., modifications, accommodations, assistive technologies)	<input type="checkbox"/> Routinely participates in alternate or non-traditional methods of assessment (e.g., isolating information; tactile support; pointing to, reaching for, or touching an answer choice; formulating a response using a choice board)

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<input type="checkbox"/> Needs that impact access and progress in several or all academic areas	<input type="checkbox"/> Significant needs that impact access and progress in ALL academic areas, which affect the student’s ability to function independently
<input type="checkbox"/> Functional goals (e.g., study skills, self-advocacy, behavior) to support access to the enrolled grade-level TEKS that may be implemented in one or more settings	<input type="checkbox"/> Functional goals (e.g., personal care and hygiene, communication, social skills) implemented across ALL settings to support access to the enrolled grade-level TEKS with the need for ongoing adult assistance (e.g., prompting, cueing, physical assist) for student progress
<input type="checkbox"/> The need for some additional support (e.g., scaffolding, general reminders, practice) to function safely in daily life and to participate in academic instruction across some or all settings	<input type="checkbox"/> The need for ongoing, individualized, specialized supports (e.g., voice output devices, tactile support, symbol or picture text support, repeated prompting and cueing, isolating information to present one at a time, adult assistance) to function safely in daily life and to participate in academic instruction across ALL settings
<input type="checkbox"/> Initiates, performs, and completes self-care routines (e.g., feeding, dressing, toileting, personal hygiene) with no or minimal adult assistance (e.g., verbal reminders, visual schedule)	<input type="checkbox"/> Requires ongoing adult assistance (e.g., prompting, cueing, physical assist) to initiate, perform, and complete self-care routines (e.g., feeding, dressing, toileting, personal hygiene) <i>NOTE: The student’s requirement of adult assistance is NOT due to a physical disability alone but rather to the student’s significant cognitive disability.</i>
<input type="checkbox"/> Follows age-appropriate directions, daily routines, and schedules with some specialized support (e.g., accommodations, assistive technologies)	<input type="checkbox"/> Requires ongoing, individualized, specialized supports (e.g., modifications, task analysis, direct instruction, assistive technologies, first/then charts, tactile schedules, social narratives) and ongoing adult assistance (e.g., prompting, cueing, physical assist) to follow directions, daily routines, and schedules
<input type="checkbox"/> Independently uses alternate response modes (e.g., augmentative and alternative communication [AAC]) to participate in academic and social conversations at an age-appropriate level <p style="text-align: center;">OR</p> <input type="checkbox"/> Independently uses traditional response modes (e.g., verbal, sign language, written) to participate in on-topic academic and social conversations at an age-appropriate level with minimal adult assistance	<input type="checkbox"/> In the process of developing a functional and consistent mode of communication (e.g., currently non-verbal, uses very limited non-symbolic communication) <p style="text-align: center;">OR</p> <input type="checkbox"/> Uses traditional response modes (e.g., verbal, sign language, written) but may be inconsistent when expressing wants and needs AND requires individualized supports to participate in on-topic academic and social exchanges at an age-appropriate level

3. Does the student have the MOST significant cognitive disability?

- Yes—All criteria marked are in Column 2
- No—One or more criteria is marked in Column 1



If No is marked, stop here. The student does not meet the participation requirements for STAAR Alternate 2 and must take STAAR.

STEP III: PROVIDE ASSURANCES AND CONFIRM STAAR ALTERNATE 2 PARTICIPATION

All assurances must be reviewed and marked for the student to participate in STAAR Alternate 2.

- The ARD committee confirms that the decision to administer STAAR Alternate 2 was NOT based on a student’s disability category, educational environment, instructional setting, demographic information (i.e., sex, ethnicity, race, at-risk, homelessness, immigrant, emergent bilingual, migrant, economically disadvantaged), need for STAAR accommodations, below-grade-level reading skills, excessive or extended absences, anticipated disruptive behavior or emotional distress, or expected poor performance on STAAR and its impact on accountability calculations.

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- Under 34 CFR §300.320(a)(2)(ii), all students who take STAAR Alternate 2 must have two short-term objectives or benchmarks for EVERY annual goal in the student’s IEP. (Refer to question 1.16 in [Question and Answer Document: IEP Measurable Annual Goals.](#))
- If the ARD committee determines that the student meets the participation requirements for STAAR Alternate 2, the committee understands that instructional and assessment decisions may impact a student’s graduation plan in high school as described in 19 TAC §89.1070.
- Under 34 CFR §300.320(a)(6) and 19 TAC §89.1055, if the ARD committee determines that the student will take STAAR Alternate 2, the student’s IEP must provide a statement of why the student cannot participate in the general assessment, STAAR, and why the alternate assessment is appropriate for the student. Additionally, if the ARD committee determines that the student is eligible to take STAAR Alternate 2 with individually appropriate and allowable accommodations, the student’s IEP must provide a statement of why the accommodations are necessary to measure the academic achievement of the student on the alternate assessment.

Document rationale below per 34 CFR §300.320(a)(6) and 19 TAC §89.1055.

4. Is the answer to question 3 “Yes,” and have all assurances been marked?

- Yes, the student meets the participation requirement for STAAR Alternate 2.
- No, the student does not meet the participation requirements for STAAR Alternate 2 and must take STAAR.

STEP IV: STAAR ALTERNATE 2 SUMMARY

Complete the information below only for the grade level or courses in which the student is enrolled during the applicable school year. A student who meets the participation requirements for STAAR Alternate 2 must take the alternate assessment for all applicable grades/subjects or courses. Note that STAAR Alternate 2 is administered once each school year, and retest opportunities are not available.

A student in **grade 3–8** who meets the participation requirements for STAAR Alternate 2 should be assessed only in the grade and subjects in which they are enrolled and should NOT be assessed above grade level. Mark the student’s enrolled grade during the applicable school year, indicating which STAAR Alternate 2 assessments the student will take.

- | | | |
|--|--|--|
| <input type="checkbox"/> Grade 3 mathematics and RLA | <input type="checkbox"/> Grade 5 mathematics, RLA, and science | <input type="checkbox"/> Grade 7 mathematics and RLA |
| <input type="checkbox"/> Grade 4 mathematics and RLA | <input type="checkbox"/> Grade 6 mathematics and RLA | <input type="checkbox"/> Grade 8 mathematics, RLA, science, and social studies |

A student in **high school** who meets the participation requirements for STAAR Alternate 2 and is enrolled in a course that has a Public Education Information Management System (PEIMS) course number indicating that the coursework is accessed through prerequisite skills should take the corresponding end-of-course (EOC) assessment. Mark the alternate high school courses with associated PEIMS course numbers in which the student is enrolled during the applicable school year, indicating which STAAR Alternate 2 EOC assessments the student will take.

- | | | |
|---|--|--|
| <input type="checkbox"/> Algebra I Alternate 03100507 | <input type="checkbox"/> English I Alternate 03220107 | <input type="checkbox"/> English II Alternate 03220207 |
| <input type="checkbox"/> Biology Alternate 03010207 | <input type="checkbox"/> U.S. History Alternate 03340107 | |