

Appendix B-3: DeSSA-Alternate Participation Criteria Rubric

Student Name: _____ Date of Birth: _____ School: _____

A student with a significant cognitive disability is one whose disability *pervasively* impacts his/her intellectual functioning and adaptive behavior. Significant deficits in intellectual functioning result in the student requiring extensive direct instruction and substantial supports in order to make measurable educational gains. Significant deficits in adaptive behavior often result in the student being unable to develop the skills needed to live independently or to function safely in their daily life at home, in school and in the community. As a result, the student is learning academic content that is reduced in depth, breadth, and complexity.

A student who does not meet ALL of the criteria for ALL content areas will participate in the DeSSA/SAT general education assessments with/without accessibility supports. If a decision is made after the beginning of the DeSSA-Alt window, the student will continue to participate in the DeSSA assessments for the remainder of the school year.

 Eligibility is being considered for participation in ALL content areas Yes- No*

 *If no, **STOP** here. Student must participate in the DeSSA general assessment.

Rating Scale:

1 – Little or No Evidence

2 – Partial or Inconsistent Evidence

3 – Complete and Consistent Evidence

Criteria	Description	Rating Scale	The Evidence support the Rating.	All IEP team members agree.
#1 Evidence of Significant Intellectual Disabilities	The student has a disability or multiple disabilities that <i>pervasively</i> impacts intellectual functioning and adaptive behavior. <i>*(adaptive behavior- essential for someone to live independently and to function safely in daily life- DLM definition)</i>	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
#2 Intensity of Instruction	The student requires specialized direct instruction and/or a wide range of supports to acquire and transfer skills to school, home, work, and community environments.	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
#3 Curricular Outcomes	The student requires extensively modified instruction with less complex and depth of skill and uses the Delaware Alternate Achievement Standards to access the Delaware Content Standards. <i>(If the student has not been instructed using the DLM Essential Elements, STOP here.)</i>	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
#4 Learning Characteristics Inventory	In addition to other data sources, the LCI was completed on _____ and the information shared when making the decision of participation in the DeSSA-Alt. <i>(must be completed yearly)</i>	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
#5 Exclusions	The decision to include the student in the DESSA-Alt is NOT based on the following: 1. existence of an IEP; 2. specific categorical label; 3. educational placement or setting; 4. English language learner status; 5. socio-economic or cultural differences; 6. excessive or extended absences; 7. disruptive behavior; 8. student's reading level; or 9. the expectation that the student will not perform well on DeSSA Gen Ed assessments	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Score Scale	Interpretation
5-9	The evidence suggests the DeSSA-Alternate is not appropriate assessment for this student. The Student must participate in the DeSSA general assessment with/without accessibility supports.
10-14	Some of the criteria fit this student. Most of the evidence suggests the DeSSA-Alternate is not appropriate for this student. The Student must participate in the DeSSA general assessment with/without accessibility supports.
15	All the criteria fit this student. The DeSSA-Alternate is most likely the most appropriate assessment for this student.

Total Rating Scale Score: _____ **out of 15** (add up the points from the Rating Scale)
 Student meets the criteria to participate in the DeSSA-Alternate Assessment. Yes No (see score interpretation)

Parent/Guardian Assurances: Parents/Guardians must check yes and initial agreement at the meeting. Boxes should not be pre-checked.

I understand that my child's participation in the DeSSA-Alternate Assessment *may* lead to a Diploma of Alternate Achievement Standards, which may not be accepted by colleges and technical/trade schools. Yes No

I understand that the standards assessed in the DeSSA-Alternate Assessment are less complex than the Delaware Content Standards assessed in the DeSSA general assessments. Yes No

I was provided information about the DeSSA-Alternate Assessment. Yes No

Parent Initials: _____

IEP team members: My signature below indicates that the student has met ALL five criteria and I agree with the decision for the student to participate in the DESSA-Alternate Assessment for ELA, Math and Science, based on alternate achievement standards.

_____	_____
(Parent/Guardian)	(Date)
_____	_____
(Parent/Guardian)	(Date)
_____	_____
(Student)	(Date)
_____	_____
(Administrator/designee)	(Date)
_____	_____
(Teacher)	(Date)
_____	_____
(Other – please specify name and position)	(Date)
_____	_____
(Other – please specify name and position)	(Date)