

Virginia Grade Level Alternative Assessment
Affidavit of Student Performance

Student Information

Student Name: _____ Date of Birth: _____

School Name: _____

School Division: _____

Subject/Course Submission: _____

Affidavit of Student Performance

I, the undersigned, do attest that all work contained in this Virginia Grade Level Alternative assessment was performed, to the best of my knowledge, by the student using allowed accommodations as noted in his/her current IEP and in the presence of a teacher and/or paraprofessional.

Further, in compiling this evidence with the student and/or on his/her behalf, I did not:

- fabricate, alter, or modify student work samples, products, or data.
- describe student behaviors that provide a negative image of the student.
- or provide any accommodation/assistive device that is not a regular part of the student's daily instruction.

Teacher: _____

Signature

Date: _____