

Attachment 3

**New York State Education Department
Multiple Day Administration Security Certificate
for Parents/Guardians**

I, _____, as the parent/guardian of _____ who attends _____ School, do certify that _____ was not given access by me to any of the questions on the following assessments prior to the dates administered and was informed not to discuss any aspects of the test with fellow students until testing was completed.

Multiple Day Administration of State Assessments:

Assessment(s)	Dates Administered

Parent/Guardian's Signature*	
Type Name	
Date	

* This form may instead be signed by the student if the student is eighteen years of age or older.

This form must be retained as part of the student's cumulative education record.
It is not e-mailed to the Office of State Assessment.