

The University of the State of New York
THE STATE EDUCATION DEPARTMENT
Office of State Assessment
Albany, New York 12234

**NEW YORK STATE IDENTIFICATION TEST FOR
ENGLISH LANGUAGE LEARNERS (NYSITELL)
WORKSHEET FOR DEVELOPING ONLINE REQUESTS**

This worksheet may be photocopied and used to prepare your school's online request for the NYSITELL for submission to the Department.

Be sure to retain in your files the final version of this worksheet that matches the online examination request submitted to the Department. You will need to use that version to check the confirmation notice, which will be emailed to your principal within three business days of the submission of your online request.

This worksheet should be retained at the school.
DO NOT submit this worksheet to the State Education Department.

School Name _____ Date _____

New York State Identification Test for English Language Learners (NYSITELL)	Regular	Large Type	Braille*
Grade K			
Grade 1			
Grade 2			
Grade 3			
Grade 4			
Grade 5			
Grade 6			
Grade 7			
Grade 8			
Grade 9			
Grade 10			
Grade 11			
Grade 12			

**The braille edition of NYSITELL cannot be requested via the Online Examination Request System. Braille editions must be requested in a separate letter signed by the principal and faxed to the Department at 518-474-2021. The letter must specify the exact quantity needed for students whose IEPs/Section 504 Plans specifically require this accommodation.*