

## New Jersey Corrective Action Plan (CAP) Form

<b>County Name and Code</b>	
<b>District Name and Code</b>	
<b>School Name and Code</b>	
<b>Name and Title of Person Completing CAP Form</b>	
<b>Phone Number and Email Address</b>	
<b>Date of Test Security Breach or Irregularity</b>	
<b>Description of Test Security Breach or Irregularity</b>	
<b>Status of Test Security Breach or Irregularity for Students Involved</b>	
<b>Status of Test Security Breach or Irregularity for District or School Personnel Involved</b>	

## New Jersey Corrective Action Plan (CAP) Form

### Corrective Action Plan (CAP)

#### Steps Taken to Prevent Future Test Security Breaches or Irregularities

- Before Test Administration
- During Test Administration
- After Test Administration

Date CAP Form Completed

## **New Jersey Corrective Action Plan (CAP) Form**

When this form is completed it must be saved as follows:

- Title of the form must be “**District Name\_School Name\_Testing Program\_Year\_Date\_CAP**”
  - For example: “**Any District\_Any School\_PARCC\_2016\_051616\_CAP**”

Districts are required to maintain a record of this completed CAP Form for a minimum of four consecutive assessment cycles.

This completed form must be emailed directly to Orlando Vadel, PARCC State Coordinator, at [orlando.vadel@doe.state.nj.us](mailto:orlando.vadel@doe.state.nj.us), upon completion.