October 6, 2014

MEMORANDUM

TO: City and County Superintendents

FROM: Thomas R. Bice  TRB
        State Superintendent of Education

RE: Nominations of Teachers to Serve on the Alabama Alternate Assessment
    Draft Performance-Level Descriptors Committee

The Student Assessment Section of the Office of Student Learning is requesting nominations of
teachers to serve on the Draft Performance-Level Descriptors Committee for the Alabama Alternate
Assessment (AAA). This committee will develop draft alternate achievement-level descriptors in
reading and mathematics that are aligned to the new Alabama Extended Standards. When selecting
the nominees, please consider those who are willing to commit to the process and to serve for the
duration of the meeting.

The attached nomination form with selection criteria must be completed and submitted to the Student
Assessment Section. Once the nomination forms have been received and reviewed, staff from the
Student Assessment Section will notify the superintendent of any teacher in his or her local education
agency (LEA) who has been selected to serve on the committee. The committee will meet
December 2-3, 2014, at the Renaissance Montgomery Hotel, 201 Tallapoosa Street, Montgomery,
Alabama. Registration will begin at 8 a.m. on both days.

Mileage reimbursement and per diem will be paid. Anyone commuting more than 50 miles one way
to Montgomery may stay overnight if he/she chooses. If he/she lives more than 50 miles away but
chooses not to stay overnight, he/she will receive round-trip mileage for each day of the meeting plus
whatever per diem is appropriate. If the participant plans to stay in Montgomery, he/she will be
responsible for making his/her own reservations.

If you have questions, please contact Nannette Pence in the Student Assessment Section at
334-242-8038.

TRB/RM/NP

Attachment

cc: City and County System Test Coordinators
    City and County Special Education Coordinators
    Mrs. Rebecca Mims
    Ms. Crystal Richardson
    Mrs. Nannette Pence

FY15-2002
Alabama Alternate Assessment (AAA)
Performance-Level Descriptors Committee Nominations Form

Please print and complete all information for the teachers you are nominating.
Note: This form is due to the Student Assessment Section office by October 22, 2014

Nomination for Reading Content Teacher, Grades 3-5

Teacher Name: __________________________ Ethnic Group: ____________ Sex: ______

School Name: ____________________________ School E-mail: _______________________

Work Telephone: __________________________ Home or Cell: _________________________

Nomination for Reading Content Teacher, Grades 6-8

Teacher Name: __________________________ Ethnic Group: ____________ Sex: ______

School Name: ____________________________ School E-mail: _______________________

Work Telephone: __________________________ Home or Cell: _________________________

Nomination for Reading Content Teacher, Grades 9-12

Teacher Name: __________________________ Ethnic Group: ____________ Sex: ______

School Name: ____________________________ School E-mail: _______________________

Work Telephone: __________________________ Home or Cell: _________________________

Nomination for Mathematics Content Teacher, Grades 3-5

Teacher Name: __________________________ Ethnic Group: ____________ Sex: ______

School Name: ____________________________ School E-mail: _______________________

Work Telephone: __________________________ Home or Cell: _________________________

Nomination for Mathematics Content Teacher, Grades 6-8

Teacher Name: __________________________ Ethnic Group: ____________ Sex: ______

School Name: ____________________________ School E-mail: _______________________

Work Telephone: __________________________ Home or Cell: _________________________

Nomination for Mathematics Content Teacher, Grades 9-12

Teacher Name: __________________________ Ethnic Group: ____________ Sex: ______

School Name: ____________________________ School E-mail: _______________________

Work Telephone: __________________________ Home or Cell: _________________________
Nomination for Special Education AAA Teacher, Grades 3-8

Teacher Name: ___________________________ Ethnic Group: ___________ Sex: ________
School Name: ___________________________ School E-mail: _______________________
Work Telephone: _________________________ Home or Cell: _______________________
Exceptionalities and Content Area: ________________________________________

Nomination for Special Education AAA Teacher, Grades 9-12

Teacher Name: ___________________________ Ethnic Group: ___________ Sex: ________
School Name: ___________________________ School E-mail: _______________________
Work Telephone: _________________________ Home or Cell: _______________________
Exceptionalities and Content Area: ________________________________________

Nomination for Hearing Teacher, Grades 3-12

Hearing Teacher Name: ___________________________ Ethnic Group: ___________ Sex: ________
School Name: ___________________________ School E-mail: _______________________
Work Telephone: _________________________ Home or Cell: _______________________

Nomination for Visual Teacher, Grades 3-12

Visual Teacher Name: ___________________________ Ethnic Group: ___________ Sex: ________
School Name: ___________________________ School E-mail: _______________________
Work Telephone: _________________________ Home or Cell: _______________________

Once the nomination forms have been received and reviewed, staff from the Student Assessment Section will notify the superintendent of any teacher in his or her LEA who has been selected to serve on the committee.

LEA Name: ____________________________________________

Superintendent’s Signature: ________________________________

E-mail to: npence@alsde.edu or FAX: 334-242-7341