**2023-24 Daily Inventory Control Form For ELPAC Materials**

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|  | School | | |  | Region |  | Loc. Code |  | CDS Code 19-64733 | | |  |
|  |  |  |  | | | | |  |  |  |  |  |
|  | Test Examiner’s Name |  | Signature | | | | |  | Grade |  | Room # |  |

The ELPAC Coordinator checks student logon credentials out to teachers and collects the log on credentials at the end of testing DAILY. Use this Inventory Control Form to monitor daily check out and check in of logon credentials.

1. Test Examiner counts and initials to confirm the materials being checked out from the ELPAC Coordinator
2. ELPAC Coordinator counts and initials to confirm the materials being returned by the Test Examiner

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Materials** | **Date** | | **Date** | | **Date** | | **Date** | | **Date** | |
| Checked  Out | Checked  In | Checked  Out | Checked  In | Checked  Out | Checked  In | Checked Out | Checked  In | Checked  Out | Checked  In |
| Answer Books (Count) |  |  |  |  |  |  |  |  |  |  |
| Printed DFAs (Count) |  |  |  |  |  |  |  |  |  |  |
| Logon Credentials (Count) |  |  |  |  |  |  |  |  |  |  |
| Student Score Sheet (Count) |  |  |  |  |  |  |  |  |  |  |
| Scratch Paper |  |  |  |  |  |  |  |  |  |  |
| Alternate ELPAC Picture Cards |  |  |  |  |  |  |  |  |  |  |
|  | TE Initials | Coordinator Initials | TE Initials | Coordinator Initials | TE Initials | Coordinator Initials | TE Initials | Coordinator Initials | TE Initials | Coordinator Initials |

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|  | By signing this document, I certify that materials were distributed and collected daily following secure district protocols.  If materials were not returned, I followed district procedures established by the Student Testing Branch to locate the missing and officially document such incident. A STAIRS report was submitted as required by State policies. | | | | |  |
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|  | ELPAC Coordinator’s Name (type or print) |  | Signature |  | Date |  |