

2019-20

TOEFL iBT® Tests

Bulletin Supplement for Test Takers with Disabilities or Health-related Needs

NOTE: This *Supplement* contains procedures and forms for requesting accommodations for the *TOEFL iBT*® Test. It should be used together with the 2019–20 *TOEFL*® *Information Bulletin*.

www.ets.org/disabilities

Visit the ETS website at **www.ets.org/disabilities** for the most up-to-date information.

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GENERAL INFORMATION

ETS is committed to serving test takers with disabilities or health-related needs by providing reasonable accommodations that are appropriate given the purpose of the test.

The information provided in this publication, in the program's *Bulletin* and on the TOEFL website should answer any questions you may have about requesting accommodations and registering for a test. The TOEFL *Bulletin* is available at *www.ets.orgltoefl*.

While many test takers with disabilities successfully take the TOEFL test with appropriate accommodations, some may want to ask their prospective institution or fellowship sponsor whether it is willing to waive the test requirement and consider their application based on other information.

All questions related to accommodations decisions should be sent to ETS Disability Services. See contact information below.

CONTACT INFORMATION

ETS Disability Services

Monday – Friday 8:30 a.m. – 5 p.m. U.S. Eastern Time (New York)

Phone: 1-866-387-8602 (toll-free in the U.S., U.S. Virgin Islands, Puerto Rico and Canada)

+1-609-771-7780 (all other locations)

Email

Inquiries: stassd@ets.org

Mail: ETS Disability Services Courier Service: ETS Disability Services

PO Box 6054 225 Phillips Boulevard

Princeton, NJ 08541-6054 U.S.A. Ewing, NJ 08628-1426 U.S.A.

HOW TO REQUEST ACCOMMODATIONS

Requests for accommodations must be submitted to ETS Disability Services for consideration. Requests can be submitted online, by email, or by mail.

Submit your request as early as possible, especially if you are requesting an alternate test format. Documentation review takes approximately four to six weeks once your request and complete paperwork have been received at ETS. If additional documentation must be submitted, it can be approximately another four to six weeks from the time the new documentation is received until the review is complete. ETS is committed to producing alternate test formats as quickly as possible; however, production times may vary.

Information about *TOEFL*® program policies, tests offered, test dates, fees and payment policies, identification (ID) requirements, test center procedures, and score reporting is available in the TOEFL iBT *Information Bulletin* and on the TOEFL website at *www.ets.orgltoefl*. It is recommended that you review this information prior to requesting accommodations. It is also recommended that you review "Tips for Test Takers with Disabilities," available at *www.ets.orgldisabilitiesltips*.

To submit your accommodations request online, you will need to create an ETS Account at www.ets.org/mytoefl. In your ETS Account, you can view approved accommodations and test appointments. In addition, if you are approved for one or more of the following testing accommodations — screen magnification and/or selectable background and foreground colors — you may be able to self-schedule your test online through your ETS account once your accommodations have been approved. If you are requesting and are approved for accommodations other than the two listed above, you cannot schedule your test online; however, you will be able to indicate your preferred test date and location online.

Steps to Request Accommodations

To request accommodations for a TOEFL test, follow the steps below:

- 1. Determine the accommodations you need.
- 2. Review TOEFL Bulletin.
- 3. Complete the Testing Accommodations Request Form.
- 4. Gather your disability documentation.
- 5. If submitting your material by mail or email, complete the test registration form.
- 6. Submit all completed forms and required documentation to ETS Disability Services by mail or email, or online through your ETS Account.
- 7. Register and submit payment once your accommodation request is approved.

Detailed information regarding each of these steps is provided in this Supplement.

STEP 1: DETERMINE THE ACCOMMODATIONS YOU NEED

HEALTH-RELATED NEEDS AND MINOR ACCOMMODATIONS

The first step in requesting accommodations is to determine the specific accommodations you need. As you make this determination, it is important to know about the medical aids that do not require approval, the minor accommodations that can be made for health-related needs, and the most commonly requested and approved accommodations.

Pre-approved Personal Items that Do Not Require Accommodation Approval

Certain medical devices are allowed in the testing room without having to request approval. These items include, but are not limited to, earplugs (foam with no strings), bandages, hearing aid/cochlear implant, spinal cord stimulator, catheter, canes, crutches, and service animals. A list of items not requiring approval as accommodations is available at *www.ets.orgldisabilitieslprometric*.

If you wear an insulin pump, you do not need to request approval unless your pump consists of two pieces (the pump that is attached to your body plus the transmitter that is used to program the pump) or your pump is especially noisy. If the pump cannot be silenced and is likely to disturb other test takers, requesting accommodations is a good idea so you can be scheduled to take the test in a separate room. A continuous glucose monitor attached to your pump does not require approval — however, if you plan to bring your glucose test kit into the testing room, you must request accommodations.

Minor Accommodations

Minor accommodations are intended to accommodate those with health-related needs, such as those affecting digestion, immune function, respiration, endocrine functions, etc. Documented health needs include conditions such as diabetes, epilepsy, and chronic pain. Minor accommodations include but are not limited to special lighting, adjustable chair or table, extra breaks for medication or snacks, or a separate room if food, beverages, or glucose testing materials are necessary during the test session.

ETS in conjunction with Prometric® has developed a list of pre-approved personal items that do not require approval. Please refer to Pre-Approved Personal Items at www.ets.orgldisabilitieslprometric.

If you require minor accommodations, you must submit:

- the **registration form** from this *Supplement* (see "Step 5: If Submitting Materials by Mail or Email, Complete the Registration Form" on page 9)
- Part I and Part II of the *Testing Accommodations Request Form* (see "Step 3: Complete the Testing Accommodations Request Form" on page 7)
- a **letter of support** from a medical doctor or other qualified professional stating the nature of the condition and the reason for the minor accommodation requested (a note on a prescription pad is not acceptable).

Most Commonly Requested and Approved Accommodations

Extended Testing Time (all tests are timed)

- 50 percent (time and one-half)
- 100 percent (double time; documentation required)

Extra Breaks — breaks are not included in testing time (can be used for medication, snacks, trips to the restroom, etc.)

Accommodations for the TOEFL iBT Test

- Ergonomic keyboard
- IntelliKeys keyboard
- Keyboard with touchpad
- Screen magnification
- Selectable foreground and background colors
- Trackball

Assistance

- · Human reader
- Scribe

Assistance for Spoken Directions (only for applicants who are deaf or hard-of-hearing)

- Oral interpreter
- Sign language interpreter

Assistance for Note Taking (only for applicants who are blind or low vision)

- Braille slate and stylus
- Perkins brailler®

Alternate test formats

- Braille (only applicants who are blind or have low vision)
- Large-print test book
- Large-print answer sheet
- Audio recording

For TOEFL iBT ® Test (only to applicants who are deaf or hard-of-hearing or have speech disabilities)

- Listening section omitted
- Speaking section omitted

STEP 2: REVIEW THE TOEFL BULLETIN

The TOEFL Information and Registration Bulletin includes program policies, fees and payment policies, identification (ID) requirements, test center procedures and score reporting information. The TOEFL Bulletin is available at www.ets.orgltoeflbulletinsandforms.

STEP 3: COMPLETE THE TESTING ACCOMMODATIONS REQUEST FORM

Complete the Testing Accommodations Request Form in this Supplement. You can complete the form in the Supplement, or you can access it through your ETS Account at www.ets.orglmytoefl.

Part I — Applicant Information

Complete this section and sign the Applicant's Verification Statement even if you are registering for accommodations identical to those that have been approved for you by ETS within the last two years.

Part II — Accommodations Requested

Complete this section even if you are registering for accommodations identical to those that have been approved for you by ETS within the last two years. If you are requesting accommodations other than those listed in Part II, you must describe them under "Other Accommodations."

Part III — Certification of Eligibility (COE): Accommodations History

You are encouraged to submit a Certification of Eligibility (COE): Accommodations History form as verification of your use of accommodations in employment or post-secondary education within the past three years.

STEP 4: GATHER YOUR DISABILITY DOCUMENTATION

You must submit disability documentation if any of the following are true:

- you are requesting accommodations other than 50 percent extended test time (time and one-half) and/or extra breaks;
- you indicate in Part I of the Testing Accommodations Request Form that you have a medical condition, or you check "Other" under "Nature of your disability;"
- you were first diagnosed with a disability within the past 12 months;
- you are requesting accommodations that are different from those that ETS approved for you within the last two years, or you are requesting those same accommodations but for a different test;
- you have not previously used the accommodations you are now requesting;
- you have a sensory disability and your accommodations request does **not** match the specifications that follow;
- you are unable to submit a Certification of Eligibility (COE): Accommodations History form.

DO NOT send documentation if you are not required to do so. Once documentation has been submitted and reviewed, all decisions are based on the documentation. Sending documentation that is not needed will delay the review process. An Individualized Education Program (IEP) or 504 Plan provides a history of disability and accommodations use — however, an IEP or 504 Plan alone is not sufficient documentation.

If you are blind or legally blind, you do **not** need to submit documentation if you are submitting a Certification of Eligibility: Accommodations History form and you are requesting only accommodations from the list below.

- Screen magnification
- Selectable background and foreground colors
- Braille
- Large print (test book and/or answer sheet)
- Recorded audio
- Human reader
- Scribe
- Braille slate and stylus
- Perkins brailler®

- 50 percent extended time (time and one-half)
- Extra breaks

If you are blind or legally blind, a request for 100 percent extended time (double time) does not require documentation if you are submitting a Certification of Eligibility: Accommodations History form and you are requesting braille, a human reader, or an audio recording.

If you have low vision or some other condition that affects visual functioning, such as an eye coordination disorder, please refer to the "Guidelines for Documentation of Blindness and Low Vision in Adolescents and Adults" on the ETS website at www.ets.org/disabilities/documentation.

If you are deaf or hard-of-hearing, you do **not** need to submit documentation if you are submitting a Certification of Eligibility (COE): Accommodation History and you are requesting only accommodations from the list below.

- Listening section omitted
- Speaking section omitted
- 50 percent extended testing time (time and one-half)
- Extra break(s)

- Sign language interpreter (for check-in assistance and spoken directions only)
- Oral interpreter (for check-in assistance and spoken directions only)

Using Previously Approved Accommodations

If you were previously approved for accommodations for a TOEFL test, please review your approval letter to determine if your accommodations approval has expired. If your accommodations have not expired, you can register following the directions in your letter.

If you have received approved accommodations from ETS for another test (for example, the GRE test, a Praxis test, etc.) and your documentation is still current, you may request the **same** accommodations for a TOEFL test during the 2019-20 testing year without providing disability documentation. The accommodations ETS previously approved for you will be approved again **if** they are appropriate for the current test.

STEP 5: IF SUBMITTING YOUR MATERIAL BY MAIL or EMAIL, COMPLETE THE REGISTRATION FORM

Complete the TOEFL iBT® Registration Form for Test Takers with Disabilities or Health-related Needs (see pages 26–29).

STEP 6: SUBMIT COMPLETED FORMS AND DOCUMENTATION

Requests for testing accommodations may be submitted via mail, email, or online. Be sure to include the appropriate documents with your submission. An incomplete application will cause a delay in processing your request.

Submitting Your Material Online via Your ETS Account

You can submit materials online via your ETS Account at www.ets.orglmytoefl. Log in and select "Accommodation Status/New Request" under the "Test Takers with Disabilities for Health-related Needs" section on your home page, and follow the instructions.

Be sure to include the following with your request:

• Disability documentation or completed Certification of Eligibility (COE): Accommodations History form, if required

Once your accommodations have been approved, you will receive an email from ETS Disability Services with instructions regarding how to register for the TOEFL test.

Submitting Your Material via Email

Be sure to attach the following completed forms with your email message:

- Testing Accommodations Request Form
- Disability documentation or completed Certification of Eligibility (COE): Accommodations History form, if required
- TOEFL iBT® Registration Form for Test Takers with Disabilities or Health-related Needs

Requests for accommodations should be sent to *disability.reg@ets.org*.

Do not include credit/debit card information with your email. Once your application is received, you will be sent an email with instructions regarding payment options.

Submitting Your Material via Mail or Courier Service

Be sure to include the following with your request:

- Testing Accommodations Request Form
- Disability documentation or completed Certification of Eligibility (COE): Accommodations History form, if required
- TOEFL iBT® Registration Form for Test Takers with Disabilities or Health-related Needs Send your material to the appropriate address below.

Mail: ETS Disability Services PO Box 6054 Courier Service: ETS Disability Services 225 Phillips Boulevard

Princeton, NJ 08541-6054 U.S.A. Ewing, NJ 08628-1426 U.S.A.

STEP 7: REGISTER AND SUBMIT PAYMENT ONCE YOUR REQUEST IS APPROVED

ETS will send you an authorization letter confirming the accommodations that have been approved.

TOEFL iBT test

The authorization letter will include instructions that you must follow to schedule your test. Do not register for a test until you receive your authorization letter. When scheduling your test, you will need to provide the information contained in the authorization letter.

Alternate test formats

A representative from ETS Disability Services will contact you to confirm the accommodations approved for you and to schedule your test.

REQUESTS TO CHANGE OR CANCEL TESTS

Policies for changing or canceling your test are included in the *Information and Registration Bulletin* on the TOEFL website, *www.ets.orgltoefl*. Rescheduling is permitted only within the same testing year.

If you are scheduled to take the TOEFL iBT test at a Prometric ® center, you may change or cancel your test by calling Prometric at 1-800-967-1139. If you need to change or cancel an alternate test format, contact ETS Disability Services. See page 3 for contact information.

TEST PREPARATION

For test preparation information, go to "Prepare for the Test" at http://www.ets.org/toeflibt/prepare/

If you need preparation materials in an alternate format, please contact ETS Disability Services. See page 3 of this supplement for contact information.

Test takers are advised to consult ETS's "Tips for Test Takers with Disabilities," which is available at www.ets.org/disabilitiesltips.

SCORING AND REPORTING

Test takers who are blind can contact ETS Disability Services by phone for their test scores. See page 3 for contact information.

If the Listening section is omitted for an applicant who is deaf or hard-of-hearing, no Listening section score or total score will be reported. If the Speaking section is omitted for an applicant who is deaf or hard-of-hearing, or for an applicant with a speech disability, no Speaking section score or total score will be reported. Only scores for the sections that are taken will be reported. The score report will indicate that the section or sections were not taken by the test taker. No other information will be provided.

GLOSSARY

Alternate format: Test format other than the one in which the test is usually delivered; examples include large print, braille and audio recording.

Braille slate and stylus: A device that enables a braille user to manually emboss braille dots onto paper. Only available for applicants who are blind or have low vision.

Certification of Eligibility: Accommodations History: A verification statement signed by an authorized professional who verifies the applicant's accommodations history and certifies that there is documentation on file that meets the ETS Documentation Criteria.

Ergonomic keyboard: A computer keyboard designed to minimize muscle strain and related problems.

Extra breaks: Breaks other than regularly scheduled breaks that are not included in the testing time. Extra breaks can be taken as needed for snacks, beverages, medication, restroom trips, etc.

Extended testing time: Extra time to take the test. The amount of extended testing time is correlated to the test taker's disability or functional limitations. Fifty percent extended testing time is time and one-half; 100 percent extended time is double time (documentation is required for 100 percent extended time or more).

Human reader: A person who reads the test aloud to the test taker. Typically for an individual with learning disabilities or traumatic brain injury or a test taker who is blind or has low vision. A human reader reads the test directions, questions and answer choices to the test taker. A human reader does not interpret, reword or explain the test, though the reader may repeat test content at the test taker's request.

IntelliKeys keyboard: A programmable alternative keyboard that enables users with physical and/or visual disabilities to easily type, enter numbers, navigate on-screen displays and execute menu commands.

Keyboard with touchpad: A standard computer keyboard with a built-in touchpad. The touchpad allows the user the option of either using no external mouse or using a secondary pointing device.

Large-print answer sheet: An answer sheet for multiple-choice questions with large blocks that the test taker can mark with X's, rather than smaller boxes or ovals that need to be filled in.

Minor accommodations: Accommodations that do not affect the test delivery or response, such as a footstool, earplugs, a special chair/desk or a cushion.

Oral interpreter: A trained interpreter who silently mouths speech for a deaf or hard-of-hearing test taker who is able to speech read. An oral interpreter may also use facial expressions and gestures and may paraphrase the language used by the speaker. This accommodation is provided for spoken directions and check-in procedures only and is available only for applicants who are deaf or hard-of-hearing.

Paper-delivered test: Any test that is ordinarily given on paper rather than on computer, or offered as an accommodation for a computer-delivered test.

Perkins brailler: A braille typewriter with a key corresponding to each of the six dots of the braille code. It is permitted for note taking only. Available only for applicants who are blind or have low vision.

Screen magnification: Enlarging the size of everything displayed on the computer screen.

Scribe: A person who writes down, or otherwise records, the test taker's responses. The scribe does not correct spelling, create answers for the test taker or help the test taker identify correct answers. The scribe simply writes the test taker's answers down on the test or answer sheet or types them into a computer.

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Selectable background and foreground colors: A feature on computer-delivered tests that permits the test taker to select the colors of the background and the text to improve contrast and minimize eyestrain.

Sign language interpreter: An individual who communicates with the test taker using sign language. Available only for applicants who are deaf or hard-of-hearing, for spoken directions and check-in procedures only.

Spellchecker: An ETS-approved spellchecker is a simple hand-held device that is sent prior to the test date to test takers who qualify for this accommodation. It is NOT the standard software spellchecker included in programs such as Microsoft® Word.

Trackball: A pointing device consisting of a ball held by a socket containing sensors to detect a rotation of the ball. The user rolls the ball with the thumb, fingers or palm of the hand to move a pointer or cursor on the screen. Used as an alternative to a mouse.

Glossary 13

TOEFL iBT® TESTING ACCOMMODATIONS REQUEST FORM Part I — Applicant Information

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TOEFL iBT® TESTING ACCOMMODATIONS REQUEST FORMPart I — Applicant Information (continued)

ACKNOWLEDGMENT

This Acknowledgment, including the Privacy Notice at **www.ets.org/legal/privacy**, contains the terms and conditions between you and Educational Testing Service ("ETS," "we," "us," "our") regarding the ETS test you are now registering for and/or the testing products and services you are now requesting (these are together referred to as "Testing Services"). It applies to all actions you take regarding the Testing Services, including creating an online account, providing survey information regarding a test that you take, requesting one of our services relating to the test and completing a test or product order and providing payment information.

Personal Information

In registering for the Testing Services, you acknowledge and agree that we have the right to obtain, collect, store use, disclose (including to public authorities and score recipients), extract and transmit (collectively "use") the personal information you provide, including your full name, home address, email address, telephone number, social security or similar number, passport number, national ID number, gender, nationality, age, date of birth, responses to other background information questions, test administration date and details, payment information and how you specifically use our Website. This also includes our use of biometric data (including fingerprints, audio recordings, facial images and video files) provided by you in the course of your registering for and participating in the Testing Services. All of the above data is referred to as "Personal Information." Which Personal Information we hold, how we use it and how long we hold it for may be subject to legal limitations in the jurisdiction in which you receive the Testing Services. ETS strives to meet these legal requirements, and further information on how we do so is provided below.

How We Use Your Personal Information

We use your Personal Information to:

- complete any registration, purchases or other transactions you request
- · improve our products and services, and identify, develop and offer new or expanded products and services
- improve and personalize your experience on the Website, and customize the content and/or format of the pages you visit
- subject to your opting-in (see below), notify you about updates, products, services and/or special offers from ETS, its affiliates and selected third parties
- ask you to participate in brief surveys or provide other information
- generate aggregate statistical studies and conduct research ourselves or jointly with others related to our products and services and the use of our Website

If you agree (or have agreed) under other agreements with ETS that we may use your Personal Information in additional ways, those other agreements will not be limited by this separate Acknowledgment.

International Transfer

ETS, its Website, and its servers are located in the United States. Therefore, your information, including Personal Information, will be transferred from your location to the United States in accordance with applicable laws. It may also be transferred directly from your location or via the U.S. to other countries who provide processing services to ETS, all at the direction of ETS and in accordance with applicable laws. In accepting this Acknowledgment, you are agreeing to cross-border transfers of your information, including your Personal Information. If you do not agree to these cross-border transfers, then you should refrain from using the Website. You may have a right under applicable law to revoke your consent to the international transfer of your Personal Information. If you do so, we are unlikely to be able to continue providing the Testing Services to you.

Acknowledgment 15

Third Party Disclosure

We communicate your Personal Information to certain third parties, within the jurisdiction of your location and elsewhere, with whom we have a direct or indirect business or contract relationship in order to provide you with the Testing Services you have requested. These third parties assist with various aspects of the delivery of the Testing Services, including security services and score distribution services.

Your Rights

In some instances, under applicable laws, you have the right to withdraw your consent and require us to delete your Personal Information should the lawful purposes for which we hold it cease. You may also request that we correct your Personal Information if it is incorrect, inaccurate, misleading or incomplete. To protect your privacy and security, we will take reasonable steps to verify your identity before granting access or making corrections.

If required under applicable laws, at your request and on satisfactory proof of identity (as determined by ETS), we will provide you (i) confirmation that we hold your Personal Information, (ii) details or a description of the Personal Information we hold in an intelligible form; (iii) information of how we came to hold the Personal Information, the purposes for which we are using it, and in some cases the methods and logic we use in processing the Personal Information; (iv) further corporate information regarding ETS and, in some circumstances, the other corporate entities who may process the Personal Information on behalf of ETS.

To request any of the above actions, please contact us at: Educational Testing Service, 660 Rosedale Road, Princeton, NJ 08541, USA, email: etsinfo@ets.org.

You may also have the right under certain applicable laws to complain to a regulatory authority in your country if you believe we have not processed your Personal Information in compliance with applicable laws.

Further Communications

We ask you to provide your contact details, including email address, telephone and mobile phone details. We use this information so that we can quickly provide you with information (principally by way of email, telephone, SMS or other electronic means) regarding the Testing Services you have requested and to provide you with information about other testing products and services (which we will do in accordance with applicable laws). When you receive communications from us about other testing products and services, you will have the opportunity of subsequently opting-out of receiving these, and our communications will contain instructions on how to do so. Remember, however, that we may still send emails or call you in order to provide the Testing Service you have purchased or otherwise requested from us.

Governing Law

You agree that this Acknowledgment will be governed by and construed in accordance with the laws of the United States and the State of New Jersey, without regard to principles of conflict of laws.

Additional Information

This paragraph containing additional information is of general application, but it is also provided for purposes of the *EU General Data Protection Regulation* when it comes into force (to the extent the Regulation is applicable to you in the context of the Testing Services):

ETS Corporate Details (including contact details): Educational Testing Service, 660 Rosedale Road, Princeton, NJ 08541, USA, email: *etsinfo@ets.org*.

Purpose and Legal Basis for Processing: To provide tests and testing services as requested, including processing for the administration of tests, such as marking and score reporting to test takers and nominated score recipients.

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Legitimate Interests relied upon: ETS requires your Personal Information for purposes of administering educational tests and providing these tests in a secure manner so that test takers receive accurate results and test qualifications are recognized by intended score recipients.

International Transfers: Data will be transferred to data processors engaged by ETS in various jurisdictions outside of the EEA, depending on the particular Testing Services requested. These transfers are made in accordance with the acknowledgment you have given above and intercompany and third party transfer agreements, in accordance with applicable laws.

Personal Information Retention: Personal Information is generally held for 5 years from the date of its submission. This period may be extended by ETS if the score for the Testing Service you require remains valid for a longer period (which information is usually contained in your testing result information), if the Testing Service you have requested is being reviewed or if our legitimate interest in retaining your Personal Information remains in place. It also may be shorter if we no longer require your Personal Information (for example, if you have expressed interest in a test but have not taken one). You may contact us at **etsinfo@ets.org** if you require further information.

Data Subject Rights: In addition to the rights described above, you may have data portability rights. For security reasons, most testing organizations will require that Personal Information be obtained directly from you and this may limit the usefulness of your data portability rights.

Supervisory Body: Please contact the national data processing authority in the jurisdiction in which you receive the Testing Services.

For Hong Kong residents only: Subject to applicable laws regarding our use of your Personal Information, we will not use your Personal Information if we do not reasonably believe that such use is in your interests. In order for us to supply you with the Testing Services, you must supply us with your Personal Information to complete any registration, purchase or other transaction you request online and/or perform any of our other contractual obligations to you which requires us to have the Personal Information.

For Australian residents only: Please be informed that if you agree to the overseas disclosure of the information or transfer of your data outside of Australia, ETS and its affiliates will not be required to take reasonable steps to ensure that ETS or its affiliates' use of such data outside of Australia does not breach the Australian Privacy Principles.

For Canadian residents only: This is the notification that ETS is required to provide to Canadian residents. Please see above regarding International Data Transfers. Where we transfer Personal Data to third parties we contractually require third parties to have a written procedures in place that comply with the requirements of the applicable privacy laws in Canada.

For Singapore residents only: In connection with the transfer of your Personal Information outside of Singapore, ETS believes that the laws of the recipient country of your Personal Information will provide a standard of protection comparable to the applicable laws of Singapore.

Contact Information

If you have questions or requests concerning our use of your Personal Information, you should contact etsinfo@ets.org.

By indicating "Accept," you expressly and voluntarily acknowledge and agree to the terms and conditions above, particularly those relating to our use of biometric data and the international transfer of Personal Information.¹

Acknowledgment 17

¹ If you are a minor as determined by applicable law <u>and</u> living outside of the United States, to the extent required by applicable law, the person clicking "Accept" must be a parent or guardian.

TOEFL iBT® TESTING ACCOMMODATIONS REQUEST FORM Part I — Applicant Information (continued)

Applicant's Nam	e:		
(please print)	First Name	M.I.	Last Name
	Verificati	on Statement to Be Signe	d by Applicant
agree to provide accommodations	ETS with any additional in s. I also give permission to	formation or documentation re- release to ETS a copy of any p	and if this application is not sufficient, I quested in order to evaluate my request for pertinent information required to establish the use of an assistive device, I am familiar with
in advance of the I also understand is requested, the	e test administration date to d that processing can take e 4 to 6 week time frame be	o provide time to evaluate and 4 to 6 weeks from the time the egins when the requested infor	ion must be available to ETS sufficiently process my request for accommodations. e application is complete. If additional informat mation is received. I acknowledge that ETS ed accommodation is warranted and appropria
accommodations I also understand	s will not be processed if I and that ETS does not waive	alter or revise Part III in any wa	istory, I acknowledge that my request for ay after the appropriate official has completed completes Part III on my behalf to submit the ministration date.
also understand contained in the	that the documentation in Certification of Eligibility: A	support of my request for acco	ormation to ETS upon ETS's request. I ommodations supersedes any information uality assurance, the Certification of Eligibility: the actual disability documentation on file.
-	ntified by name in research	-	arch purposes, and that in no case will any tion will be protected by the terms of ETS's
in ETS's judgme	nt, any information present		scores if it is subsequently determined that, rting documentation is either questionable,
its in-house expe		quest for accommodations, I a	nsultants with whom it may consult to augmen uthorize and provide my consent to ETS to
Signature of App	olicant		Today's Date
	Keep a co	opy of this completed form fo	or your records.

TOEFL iBT® TESTING ACCOMMODATIONS REQUEST FORM Part II — Accommodations Requested

Applicant's Nam	ne:				
(please print)	First Name	M.I.		Last Name	
Today's Date:	Month Day Year				
	eived ETS approval within the nentation is still current, ple	ne last two years for accomr ase indicate the following:	nodations i	identical to those you are re	equesting now,
	GACE® GRE® School Leadership Series	☐ HiSET® ☐ F ☐ Texas Educator Cer	ParaPro tification	Praxis® TOEFL	
Previous test(s)	taken:	F	revious tes	st date(s) (month/year):	
	REQUEST	ED ACCOMMODATIONS	(Check al	I that apply)	
Accommodation	ons for Computer-deliver		`	11 37	
□ Ergonomic k□ IntelliKeys ke□ Keyboard wi□ Screen mag	seyboard eyboard ith touchpad				
□ Large-print to Other Accom□ Large-print a□ Audio record□ Listening sec□ Speaking se	applicants who are blind o est book (Test taker must a nmodations) answer sheet ding ction omitted	r have low vision) also request paper-delivered nts who are deaf or hard-of-			?0 — Under
				(continued	l on next page)

¹ Extended time for the TOEFL test generally does not apply to spoken responses.

Testing Accommodations Request Form Part II - Accommodations Requested

TOEFL iBT® TESTING ACCOMMODATIONS REQUEST FORM Part II — Accommodations Requested (continued)

Applicant's Nam	e:		
(please print)	First Name	M.I.	Last Name
	TE: If you are requently submit document		e, and your disability is NOT blindness or legal
☐ Perkins brail☐ Sign languaçhard-of-hear	and stylus (for note ler (for note taking o ge interpreter (for ch ring)	·	•
documentation r	ng Time (NOTE: All nust be submitted.) time and one-half)	tests are timed; if you are requesting 100 percent (double time)	g more than 50 percent extended time,
Extra Breaks. B ☐ Yes	reaks are not includ	ed in testing time (can be used for m	nedication, snacks, trips to the restroom, etc.)
			nan those listed on page 19 and above below and submit appropriate documentation.
NOTE: If you are	e requesting a large-	-print paper test as an accommodatio	on, please indicate here.
1			
2			
3			
4.			

TOEFL iBT® TESTING ACCOMMODATIONS REQUEST FORM Part III — Certification of Eligibility: Accommodations History

Applicant's Name:			
(Please Print)	First Name	M.I.	Last Name

The Certification of Eligibility (COE): Accommodations History serves two distinct purposes:

- to provide verification of an individual's use of accommodations in either college or in the workplace
- as a shortcut for approval of certain specific accommodations for most disabilities.

A completed COE: Accommodations History will only be considered in place of disability documentation from qualified applicants with

- 1. LD, ADHD, TBI, ASD, psychiatric disabilities, and/or physical disabilities, who are requesting 50% extra time and/or additional breaks only; OR
- 2. Visual impairments or hearing losses who are requesting those accommodations listed on page 6 for these conditions.

For any other accommodations (double time, separate room, reader, etc.) applicants must submit disability documentation directly to ETS for review.

This form must be completed and signed by an authorized professional representing one of the following:

- Office of Disability Services at test taker's college or university
- Human Resources office at test taker's place of employment
- Department of Vocational Rehabilitation (DVR) office in test taker's state of residence

Certification of Eligibility: Accommodations History forms completed and signed by members of the applicant's family, or by the licensed and/or certified individual who diagnosed the disability, will not be considered.

After reading this page, please complete pages 22 to 25.

TOEFL iBT® TESTING ACCOMMODATIONS REQUEST FORM Part III — Certification of Eligibility: Accommodations History (continued)

Applicant's Name:				
(Please Print)	First Name	M.I.	Last Name	

DIRECTIONS FOR COMPLETING THE COE: Accommodations History

The COE can be used in lieu of documentation or as verification of the accommodations used in a postsecondary setting. The authorized professional should initial each of the documentation criteria listed below. Please clearly write your initials for each item.

Does the candidate's documentation...

	Yes	No	N/A	
1.				Meet the currency criteria set forth at www.ets.org/disabilities (e.g., LD, ADHD, and/or ASD within 5 years)?
2.				Include complete educational, developmental, and medical history relevant to the disability for which accommodations are being requested?
3.				Describe the functional limitations resulting from the diagnosed disability?
4.				List the test instruments used in the evaluation report and relevant subtest scores used to document the stated disability? (All test instruments should have adult norms.)
5.				Describe the specific accommodation(s) requested and adequately support each requested accommodation?
6.				Present itself on official letterhead, typed, signed and dated by an evaluator qualified to make the diagnosis (include information about license, certification, and area of specialization)

TOEFL iBT® TESTING ACCOMMODATIONS REQUEST FORM Part III – Certification of Eligibility: Accommodations History (continued)

Applica	nt's Name	9:		
(Please	Print)	First Name	M.I.	Last Name
Provide	the follov	ving information regard	ding the disability documentation or	n file:
A.		nd credentials of the prisan Smith, MD, Psychi	ofessional who completed the mos iatrist)	t recent evaluation.
		Name	Degree	Area of Expertise
В.	Date of p	professionals most rece	ent evaluation:/ Month Year	
C.	Applicant been gra		or disabilities, as stated in the doc	umentation, for which accommodations have
D.	Extended	d testing time (NOTE: a	ations the applicant has received a all tests are timed; if applicant is reted). Please check the appropriate	questing more than 50% extended time, box:
	environm	nent," please describe		ent used a "reduced distraction testing
	2.			
	3.			
	4			
	5			
E.	During w	hat period of time has From/ Month Yea		mmodations?

TOEFL iBT® TESTING ACCOMMODATIONS REQUEST FORM Part III — Certification of Eligibility: Accommodations History (continued)

Applica	nt's Name:			
Please	Print)	First Name	M.I.	Last Name
F.	Has the a	pplicant used these a	accommodations for at least one sem	ester or four months?
	yes	no		
G.	Where ha	s the applicant used	the accommodations?	
	☐ Colleg	e/University		
	☐ Place	of Employment		
	☐ Other	(indicate):		
		Au	thorized Professional's Verification	n Statement
pl	ace of emp			es, a Human Resources counselor at The evaluator who conducted the testing

I certify that the accommodations indicated in Part III are those that were documented as necessary and approved for the applicant.

I certify that I have reviewed the Educational Testing Service (ETS) Documentation Criteria (including ETS guidelines about LD, ADHD and psychiatric disabilities, if applicable), and that the applicants documentation supporting the disability or disabilities and the need for specific accommodations meets those criteria and is on file in this office. For quality assurance, Part III – Certification of Eligibility: Accommodations History may be subject to an audit resulting in a review of the actual disability documentation on file.

In the event that ETS requests a copy of any of the documentation cited above, I agree to send ETS, for its consideration, the complete file of documentation pertinent to establishing the need for these accommodations. I understand that the applicant authorizes the release of this information pursuant to the applicant's verification statement.

I also understand that if ETS determines at any time that the applicant's documentation does not meet the ETS Documentation Criteria, ETS will withhold or cancel the applicant's score(s).

TOEFL iBT® TESTING ACCOMMODATIONS REQUEST FORM Part III — Certification of Eligibility: Accommodations History (continued)

Applicant's Nam	ne:		
(please print)	First Name	M.I.	Last Name
	Authoriz	ed Professional's Verification Sta	tement (continued)
Signature of Aut	horized Professional		Today's Date
Print Name			
Title			
Name of Institut	ion/Agency/Place of E	mployment	
Telephone		Fax	x #
Email Address			
		Attach Business Card He	ere



2019–20 TOEFL IBT® REGISTRATION FORM FOR TEST TAKERS WITH DISABILITIES OR HEALTH-RELATED NEEDS

If you are requesting accommodations for the *TOEFL*® test, you must complete and submit this registration form in addition to the Testing Accommodations Request Form (pages 14–25). **Note:** You cannot schedule a test until you receive your authorization letter. Accommodations can only be provided when you follow the instructions in your authorization letter.

All required fields must be completed, or your form will be returned. Required fields are noted with an asterisk (*).

Note: If you will be **emailing** your accommodations request or prefer to pay online, **do not** enter your credit/debit card information on this form. When your documents are received, an email will be sent to you with instructions about payment.

Print all information clearly. Be sure to enter your name exactly as it is shown on your primary identification document. Use blue or black ink.

Submit this form, together with all your completed forms and documentation requesting accommodations, by mail or email. See details at **www.ets.org/disability**.

If you have previously taken birth, and registration number	an ETS iBT-delivered test, please indicer below.	ate your nam	ne, test date, date of
First Name:		Test Date:	
Date of Birth:	Registration Number:		

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2019–20 TOEFL iBT® Registration Form for Test Takers with Disabilities or Health-related Needs (continued) * Last (Family/Surname) Name (as on photo ID): * First (Given) Name (as on photo ID): Middle Name or Middle Initial (as on photo ID): * Address Line 1: Address Line 2: Address Line 3: Address Line 4: * City: * State or Province: * Code for Country of Citizenship (refer to Bulletin): * ZIP or Postal Code: * Country Code for this Mailing Address (refer to Bulletin): * Native Country Code (refer to Bulletin): * Native Language Code (refer to Bulletin): * Date of Birth: Gender: Day Year Male **Female** Month Identification Document to be presented on test day: **Number on Identification Document: Country Listed on Identification Document:** * Primary Phone Number (include area code, country code, or city code): Secondary Phone Number (include area code, country code, or city code): * E-mail Address:

Name: __

2019–20 TOEFL iBT ® Registration Form (continued)

2019–20 TOEFL iBT ® Registration Form (continued) Name	e: ————————————————————————————————————
TEST FEES	
The TOEFL iBT test fee varies by country. To find out what the fee ETS account and choose your test location. Fees are subject to cha	
TOEFL iBT test fee	\$
Add Value-Added or similar taxes where applicable	\$
TOTAL AMOUNT DUE (DO NOT SEND CASH)	\$
ACCEPTABLE PAYMENT METHODS Credit/debit card (American Express®, Discover®, JCB®, MasterCar Any credit/debit card branded with one of these five accepted credit Payment type: (check one)	Money Order in US\$ denter your card number, expiration date, and the all services you request on this form. clude credit card information on this registration email with instructions regarding payment. MasterCard® VISA® Expiration Date Expiration Date Month Year at its discretion to use the information on your mount of your check; no additional amount will be rvices must be paid in full in order to register for Acknowledgment attached as pages 15 to 17 of this form or and Registration Bulletin, specifically those ores, and the confidentiality of test questions.
Signature:	
Thank you for registering to take the TOEFL iBT test. Confirmation address. Do NOT send your registration form more than once. This Services and unnecessary charges to you.	



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