

GUIDE FOR TEST TAKERS WITH DISABILITIES

TOEIC®
LISTENING
&
READING
TEST



THE REDESIGNED
TOEIC Bridge

LISTENING
&
READING
TEST

TF1"



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For more information, visit us on the web at **www.etsglobal.org** or contact your local ETS Preferred Network (EPN) office. A list of local EPN offices can be found on the web at **www.etsglobal.org.** If there is no ETS Preferred Network office in your country, please contact us at:

TOEIC Programme

This publication contains instructions for requesting non-standard testing accommodations for the following test brands: $TOEIC^{\circ}$ test, Redesigned TOEIC Bridge test, and TFI° test. It should be used in conjunction with the information provided in the appropriate Examinee Handbook.

Customer Service

The information provided in this publication and in the program's Examinee Handbook should answer any questions you may have about the TOEIC, TOEIC Bridge, or TFI test brands. The policies regarding testing accommodations can be found by clicking on the "Disabilities" tab on each program's website.

Examinee handbooks can be obtained from your local ETS Preferred Network office (EPN) or by visiting the program's website. A list of EPNs can be found on the web at *http://www.ets.org/epn_directory*.

Registration information

ETS and its ETS Preferred Associates (EPAs) are committed to serving test takers with disabilities by providing services and reasonable accommodations that are appropriate given the purpose of the test. Non-standard testing accommodations are available for test takers who meet the requirements.

ETS recognizes that laws governing the release of personal information vary from country to country. In some countries, EPAs may not request that test takers provide certain types of personal information. To the extent allowable by local law, test takers should provide sufficient documentation to allow the EPA to fairly evaluate the accommodation request.

All requests for accommodations must be approved in accordance with ETS and/or EPA policies and procedures, and must be made on the Request for Non-standard Testing Accommodations form (pages 4–8).

Because your local EPA must review documentation in order to provide appropriate accommodations, all test takers requesting any accommodations must register through the EPA. Documentation review takes approximately three weeks once all necessary documentation has been submitted.

Braille, audio, reader, or large-print formats:

Requests for these formats may require **up to eight weeks** for production after accommodation approval.

We urge you to send in your request for testing accommodations well in advance of your planned test date.

Note: If a test section is omitted for an applicant who is deaf, hard of hearing, or visually impaired, the score report may show a minimum score of "5" for the section that was omitted. The score report may also show "NA" (not applicable) for the section that was omitted.

Standby test takers

Standby or walk-in registration is not available for non-standard test administrations.

How to request accommodations and register

You must submit your request for accommodations to your local ETS Preferred Associate (EPA) by the registration deadline provided by the EPA.

Note: All requests for testing accommodations must be reviewed and approved before your test can be scheduled. All materials must be submitted together or your registration will be returned to you unprocessed, which may cause your test to be delayed.

What to Include in Your Request

Include the appropriate registration form(s) and the proper fee for the test you are taking.
 Registration forms and fee information are available from your local EPA.

AND

2. Include a completed Request for Non-standard Testing Accommodations form (pages 4–8).

You must complete Part I-Applicant Information and sign the Verification Statement.

You must complete Part II—Testing Accommodations Requested.

• You must submit your disability documentation, **UNLESS** you are registering for testing accommodations identical to those that an EPA or ETS has approved for you within the last two years.

How to register using previously approved accommodations

If your request for accommodations has been approved by an EPA or ETS within the last two years, and your documentation is still current, you may request the same testing accommodation(s) for any TOEIC, TOEIC Bridge, or TFI test. If you are registering for a different test than before, the accommodation(s) previously approved for you within the last two years will be approved again if they are appropriate for the current test.

To register, submit the appropriate registration form, appropriate fees, and Parts I and II of the Request for Non-standard Testing Accommodations form. Be sure to indicate the previous test name and test date.

Minor accommodations

Some test takers require only minor accommodations to the standard testing environment due to documented medical conditions. Minor accommodations include, but are not limited to, special lighting, an adjustable table or chair, and/or rest breaks for medication or snacks. Examples of documented medical conditions include diabetes, epilepsy, or chronic pain. These test takers must submit Parts I (Applicant Information) and II (Testing Accommodations Requested) of the Request for Non-standard Testing Accommodations form. If allowable by local laws, test takers should provide a letter of support from a doctor or qualified professional stating the nature of the condition. If the test taker has documentation indicating previously approved testing accommodations, this documentation should be presented to the EPA.

Submitting your request to the ets preferred associate

Send all completed requests for testing accommodation(s) to your local ETS Preferred Associate (EPA).

A list of EPAs can be found on the web at http://www.ets.org/epn_directory.

If your request is approved

Once your request for accommodation(s) is approved, your local ETS Preferred Associate (EPA) will send you a letter confirming the accommodation(s) that have been approved for you and identify the testing location and supervisor. Allow up to three weeks from the time your completed request is received by the EPA to receive your letter of authorization. If the centre cannot accommodate your request on the scheduled testing date, you will be contacted by the EPA to arrange an alternate administration date.

Scoring and reporting

In most cases, score reports contain no indication of whether a test was taken with accommodation(s). In rare instances, when an accommodation significantly alters what is tested (for example, if an entire test section must be omitted), a statement may be included with the score report indicating that the test was taken under non-standard testing conditions. Score reports do not indicate the nature of the disability or the accommodation(s) given. Score recipients are also reminded that test scores should be considered only one part of an applicant's record.

Request for non-standard testing accommodations

Instructions

Send all required items to your ETS Preferred Associate in ONE mailing.

| | What to send | Who should send it |
|---|--|--|
| 1 | Completed registration form and fee | ALL applicants |
| 2 | Part I—Applicant Information (see pages 5–6) | ALL applicants |
| 3 | Part II—Testing Accommodations Requested (see page 7) | ALL applicants |
| 4 | Part III—Disability Documentation (see page 8) | ALL applicants, unless you are registering for the identical accommodations that have been approved for you by ETS or your local EPA within the last two years. |
| | Submit your documentation and history of testing accommodations with Parts I and II . The ETS Preferred Associate will review your documentation and determine whether it supports the request for accommodations. An Individualized Education Program (IEP) or 504 Plan alone may not be used. | Submit your documentation, including history of testing accommodations, to the ETS Preferred Associate 1. if you have a disability that is not specifically listed in Part I; or 2. are requesting any accommodation(s) other than 50 percent extended testing time (time and one-half), extra breaks, and/or braille (if you are blind or have low vision); or 3. have not previously used the testing accommodations you are requesting; or 4. were diagnosed with a disability within the last 12 months. |
| | , | documentation for review, please use the ETS Vision isual disability located on the Disabilities tab of the |

| Mailing Address Country Gender Male Female Day Phone Number (Voice Voice Voice | tacted via: | | Dat Mo | gistrati onth ening P | on N hone | e Nur | Day | | | | | Year | | | | | |
|--|-------------|--|-------------|-----------------------------|--------------------------|-------|-------|-------|-------|------------|----|------|-------|---|-------|-----|---|
| Gender Male Female Day Phone Number (Voice Include country/area code) Gax Number Include country/area code) Would prefer to be cont | tacted via: | | Dat Mo | te of Bi onth ening P | rth Phone untry, | e Nur | Day | | | | | Year | | | | | |
| Gender Male Female Day Phone Number (Voice Include country/area code) Gax Number Include country/area code) Would prefer to be cont | tacted via: | | Dat Mo | te of Bi onth ening P | rth Phone untry, | e Nur | Day | | | | | Year | | | | | |
| Gender Male Female Day Phone Number (Voice Include country/area code) Gax Number Include country/area code) would prefer to be cont | tacted via: | | Dat Mo | te of Bi onth ening P | rth Phone untry, | e Nur | Day | | | | | Year | | | | | |
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| anclude country/area code) Fax Number Include country/area code) would prefer to be cont | tacted via: | | (Inc | clude coo | untry/ dres: | /area | | (Void | ce/TT | <u>()</u> | | | 7 | | | | |
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| would prefer to be cont | | | | E-ma | | | | | | | | | | | | | |
| | | | | _ E-ma | | | | 1ail | | Г | 一. | hon | | _ | Fax | | |
| lature of your disability ADD/ADHD Learning disability Blindness | | apply): Deafness Hard of hea Physical dis | | | CWri | iting | _ | | 9 | | | | | | eak | 9 | |
| Low vision | | ther (descr | ribe) . | | | | | | | | | | | | | | |
| Date your disability was | _ | Month \ | Year | | | | | | | | | | evalu | Μ | lonth | Yea | r |
| Name and credentials of Have you received testin f yes, please list the acco | g accommod | ations with | hin t | | | | | | | | | | | | No | | Y |

| Applicant's Nam | e: | | |
|--|---|--|--|
| (Please print) | Last | First | M.I. |
| Verification Sta | tement to be Signe | ed by Applicant | |
| orovide ETS and/o to evaluate my req nformation requir | r the ETS Preferred Ass uest for accommodati | corded on this application is true, and if this application ociate (EPA) with any additional information or documenons. I also give permission to release to ETS and/or the EF ed for the accommodation(s) requested herein. If I am rec | ntation requested in order PA a copy of any pertinent |
| EPA sufficiently in a accommodations. | advance of the test adı | ecessary to process this application must be available to ministration date to provide time to evaluate and process S and/or the EPA reserves the right to make final determi and appropriate. | s my request for |
| • | • | nation may also be used for research purposes, and that i s, and that the information will be protected by the terms | - |
| ETS's Privacy and S | ecurity Policy can be f | ound on the program's website. | |
| determined that, in | n ETS's and/or the EPA's | EPA reserves the right to withhold or cancel my scores if is judgment, any information presented in this application accurate, or used to obtain accommodations that are not | n or supporting |
| Signature of Applic | ant | | |
| | Кеер | a copy of this completed form for your records. | |

| Applicant's Name: | | | |
|-------------------|------|-------|------|
| (Please print) | Last | First | M.I. |

| PART II — TESTING ACCOMMODATIONS REQUESTED | | | | | | | | |
|--|--|--|--|--|--|--|--|--|
| If you have received approval from ETS or your local EPA within the last two years for accommodations identical to those you are requesting now, and your documentation is still current, please indicate the following: | | | | | | | | |
| Previous test(s) taken: Previous test date(s): | | | | | | | | |
| | | | | | | | | |
| Alternate Test Format (check all that apply) Previous Registration Number(s) (if known): | | | | | | | | |
| Braille | | | | | | | | |
| Omit Listening section* | | | | | | | | |
| Large print** Audio Test (Listening section only)** | | | | | | | | |
| Audio Test (Listening section only)** Fytonded Testing Time (Note: All tests are timed) | | | | | | | | |
| Extended Testing Time (Note: All tests are timed) 100 persont (double time) | | | | | | | | |
| 50 percent (time and one-half) 100 percent (double time) Additional Rest Break(s) Yes | | | | | | | | |
| Additional Rest Break(s) Yes Assistance | | | | | | | | |
| Reader Sign language interpreter (for directions)* | | | | | | | | |
| Person to write responses Oral Interpreters Script (Listening Section)* | | | | | | | | |
| on the answer sheet | | | | | | | | |
| | | | | | | | | |
| Other Accommodations (describe) | | | | | | | | |
| Other Accommodations (describe) | | | | | | | | |
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| | | | | | | | | |
| | | | | | | | | |
| *Only applicants who are deaf or hard of hearing | | | | | | | | |
| **Only applicants who are blind or have low vision | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

| Applicant's Name: | | | |
|-------------------|------|-------|------|
| | | | |
| (Please print) | Last | First | M.I. |

PART III — ETS DOCUMENTATION CRITERIA

The documentation submitted must generally satisfy the ETS documentation criteria. ETS acknowledges that documentation from international sources will vary in scope and substance, and therefore will be reviewed on a case-by-case basis in accordance with the following criteria:

Documentation for the applicant must:

- be typed in English, or translated by an authorized translator into English and printed on official letterhead and **signed** by an authorized professional qualified to make the diagnosis (include information about license or certification and area of specialization);
- **describe the functional limitations** resulting from the disability or disabilities and how they are relevant to the testing situation;
- include documentation of any previously granted testing accommodations;
- **include a list of all test instruments** used in the evaluation report and relevant subtest scores used to document the stated disability. (This requirement does not apply to physical or sensory disabilities of a permanent or unchanging nature);
- · describe the specific accommodations requested;
- adequately support the need for each of the requested testing accommodation(s);
- be current, depending on the disability. For specific currency requirements for different types of disabilities, please go to:

https://www.etsglobal.org/nl/en/help-center/persons-with-disabilities/accommodation-test-takers-disabilities.

For more than 40 years as an industry leader, the TOEIC programme has set the global standard for assessing English-language communication skills needed in the workplace and everyday life. The TOEIC assessments are the most widely used around the world with 14,000+ organisations across more than 160 countries trusting TOEIC Test Scores to inform the decisions that matter.

At non-profit ETS, our mission is to help advance quality and equity in education by providing fair and valid assessments, research and related services. Our products and services measure knowledge and skills, promote learning and performance, and support education and professional development for all people worldwide.

To learn more about the *TOEIC*® Programme:

visit: www.etsglobal.org email: mh@etsglobal.org







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