

# GENERIC SECURITY AGREEMENT FORM

## SkillsUSA Georgia Testing Events

I, the undersigned, understand that materials used for SkillsUSA Georgia online tests are confidential. I hereby agree to maintain the confidentiality of all testing materials and understand that the security of testing materials is maintained by protecting all items from loss, unauthorized access, or reproduction. Furthermore, maintaining test item security prohibits any test proctor from the following:

1. Unauthorized printing or photocopying any test items or materials, or
2. Assessing or removing test materials from the secure locations, or
3. Utilizing test items in any form, either from a copy of the test instrument or as a practice exercise to expose candidates to the test items, or
4. Allowing students to access events at times other than their scheduled testing time,
5. Allowing students to test in one event more than once, or
6. Allowing instructors and others to view test content.

I understand that access to testing will be monitored by the vendor and inconsistencies will be reported to the SkillsUSA Georgia office for investigation. I further understand that compromising test security in any way will result in the disqualification of all SkillsUSA students testing at this school.

If the competitor brings notebooks, papers or texts, have the competitor leave them in a central location at the front of the room where they may pick them up when finished with the test. Please do NOT chew gum or make any unnecessary noise during the time you are in the testing room. Competitors may not leave the room until they have completed the test. No resource material may be used for any online test.

In order to maintain the integrity of the testing and competitive process, I further understand that advisors are not allowed to access or view tests at any time and that advisors are not allowed to question proctors or students about test content.

### Proctor & Testing Site Information

Proctor Name (please print): \_\_\_\_\_

School: \_\_\_\_\_

Proctor phone number: \_\_\_\_\_

Proctor Email Address: \_\_\_\_\_

Proctor's position with system: \_\_\_\_\_

Name of testing site (s): (computer lab, library, etc.): \_\_\_\_\_

### Advisor Information

School: \_\_\_\_\_

Advisor Phone Number: \_\_\_\_\_

Advisor Email Address: \_\_\_\_\_

\_\_\_\_\_  
Advisor Signature

\_\_\_\_\_  
Advisor Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Proctor Signature

\_\_\_\_\_  
Proctor Name

\_\_\_\_\_  
Date