

IR page _____ of _____

School Code: _____



2015 AP[®] Coordinator's Incident Report (IR) Form

Date of Report: _____ School Name: _____

City: _____ State: _____ ZIP/Postal Code: _____ Country: _____

AP Coordinator Contact Information

Name (please print): _____ Signature: _____

Summer Phone Number: () _____ Email: _____

Exam Information (Please print)

Exam Title: _____

Exam Code: _____

Exam Section: _____

Exam Date: _____

Exam Form (Please print)

The form information appears in the lower right-hand corner of the multiple-choice and free-response booklets. Please include the form (e.g., Form O, A, I, etc.) and the form code (e.g., Form 4LBP).

Form: _____

Form Code: _____

Type of Incident (Grid all that apply and explain the events in detail below)

- Defective Materials (Grid all that apply)
 - Multiple Choice
 - Free Response
 - Master Audio CDs
 - Student Response CD or Tape
 - Chinese and Japanese Exams on CD
- Equipment Problems
- Used School-Supplied Replacement Tape/CD
- Misplaced Answers
- Illness
- Missing Exam Materials
- Misconduct Student Dismissed
- Overtiming — Number of Minutes: _____

- Undertiming — Number of Minutes: _____
- Interruption — Number of Minutes: _____
- Disturbance — Number of Minutes: _____
- Student Shared Same AP Number
- Student Used Ink on Answer Sheet
- Student Used Extra Paper
- Student Used Cell Phone/Prohibited Device or It Made Noise
- Student Removed/Attempted to Remove Exam Materials
- Testing Off-Schedule
- Other

Was AP Services for Educators contacted? yes no

AP Services Case Number: _____

Did the incident compromise the student's ability to test enough to require late testing? yes no

Has an alternate exam been ordered? yes no

Individual student incident — Complete the following:

Student's Name: _____ **Student's AP Number:** _____

Group incident — On a separate piece of paper, provide the exam title, the school code, and the names and AP numbers of all students involved.

Number of Students Involved: _____

REQUIRED: Incident Detail — Explanation (Describe all events and actions taken on next page)

| ETS USE ONLY | | | | | | | | |
|--------------|----|-----|----|----|----|-----|------|----------|
| FRB | SR | MCB | OB | ML | MS | C/J | DATE | INITIALS |
| | | | | | | | | |



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Incident Detail

REQUIRED: Incident Detail — Explanation (Describe all events and actions taken):