Early Posttest Application Form Montana WIOA AE



This form must be used, signed, uploaded to LACES, and approved by the OPI before administering an early posttest. Local AE staff will communicate to the OPI AEFLA staff that the form was uploaded to LACES. OPI AEFLA staff will leave a comment in LACES with details of approval/denial and respond by email.

Program Name:			
Client Name:		LACES ID:	
NRS Pretest (Assessment,	Form, Level):		
Pretest Scale Score:			
Anticipated NRS Posttest	(Assessment, Form, Level):		
Initial (or most reco	ent) Educational Function	oning Level Based on NRS Pretest	
AE/ASE:	EL:		
Points to next EFL*:			
The client has indic	am earlier than expected and instructor e cated that he/she will be exiting	evaluation determined that the client will likely make a gain on a p the program permanently. ely prepared to demonstrate a measurable posttes	
	nstructional hours between asse th specific evidence to documen	essments: nt client is likely to achieve a posttest gain.	

AE Director/Leadership Designee Verification:

Name:

By signing below, I verify that this client meets the requirements for an early posttest.

Signature: Date:

^{*}Refer to respective Test Administration Manuals or report available on LACES.