

**Attachment 3**

**New York State Education Department  
Next-Day Completion Security Certificate  
for Parents/Guardians**

I, \_\_\_\_\_, as the parent/guardian of \_\_\_\_\_ who attends \_\_\_\_\_ School, do certify that \_\_\_\_\_ was not given access by me to any of the questions on the following assessments prior to the dates administered and was informed not to discuss any aspects of the test with fellow students until testing was completed.

**Next-Day Completion of Testing for English Language Learners on Regents Examinations**

| Assessment(s) | Dates Administered |
|---------------|--------------------|
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|               |                    |

|                              |  |
|------------------------------|--|
| Parent/Guardian's Signature* |  |
| Type Name                    |  |
| Date                         |  |

\* This form may instead be signed by the student if the student is eighteen years of age or older.