☐ CASAS Diagnostic Pre-Test (Date)_____
☐ CASAS Diagnostic Post-Test (Date)_____
*Post-test prior to exit and within the program year for skill gain

SOUTH CENTRAL WORKFORCE - *ABE* CASAS Scores & EFL Certification

Participant Name: _____ Seeker Case #: _____

Test Administered by: _____ Testing Instrument: ☐ CASAS Diagnostic
Other: _____ (If using a test other than CASAS, attach documentation justifying accommodation)

Test Scores: **CASAS Reading** EFL _____ SCORE _____ GRADE LEVEL _____

CASAS MATH EFL _____ SCORE _____ GRADE LEVEL _____

	EFL	CASAS SCORE	EFL DESCRIPTION	GRADE LEVEL	READING	MATH	
Basic Skills Deficient	**LEVEL 1**	Math 193 or below Reading 203 or below	Beginning ABE Literacy	0 - 1.9	☐	☐	
	LEVEL 2	Math 194 - 203 Reading 204 - 216	Beginning Basic Education	2 - 3.9	☐	☐	
	LEVEL 3	Math 204 - 214 Reading 217 - 227	Low Intermediate	4 - 5.9	☐	☐	
	LEVEL 4	Math 215 - 225 Reading 228 - 238	Middle Intermediate High Intermediate	6 - 7.9	☐	☐	
	LEVEL 5	Math 226 - 235	High Intermediate	7 - 8.9		☐	Basic Skills Deficient
	LEVEL 5	Reading 239 - 248	Low Adult Secondary Education	9 - 10.9	☐		
	LEVEL 6	Math 236 and above Reading 249 and above	Adult Secondary Education High Adult Secondary Education	9 - 12 11 - 12	☐	☐	

Testing Certification: I certify that the above named participant has attained the above stated benchmark.

_____ _____
WIOA/Testing Agency Representative Signature Date