

# **Examination Evaluation Questionnaire**

## **Part B**

**Bureau of Education and Testing  
Psychometrics and Research Unit**

# EXAMINATION EVALUATION QUESTIONNAIRE

## PART B

*Part B is designed to obtain in depth information regarding the:*  
*a) psychometric soundness of the examination, and*  
*b) vendor credentials, services and fee to ensure the examination meets the requirements of 61-11.015 FAC*

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### **CONTENT AND IDENTIFICATION OF EXAMINATION**

1. Include a copy of the test blueprint/specifications which outlines the content of this examination.

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2. How many parts are there to this examination?

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3. For the examination parts, does each part require a separate passing score?

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4. What is the format of this examination (e.g., multiple choice, true/false, short answer)?  
List parts separately.

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5. If multiple choice, are "two-tiered" or "k-questions" used? If yes, approximately what percent are "two-tiered" or "k-questions"?

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6. How many questions are on this examination? List parts separately.

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7. What are the content areas for this examination? Include a detailed description of the content areas including the percentage of items allocated to each area.

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8. Approximately what percent of the items on this examination address each of the following cognitive levels?

\_\_\_\_ Knowledge (Recall)

\_\_\_\_ Application or higher

9. Are all items on this examination weighted equally during scoring? If not, please explain.

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**VALIDITY OF THE EXAMINATION**

10. Is the content of this examination based on a job/task analysis? If not, please specify on what basis examination content was determined.

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11. When was the most recent job/task analysis performed (or updated)?

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12. Describe the process used to construct the job/task analysis.

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13. What criteria were employed to rate each task (such as frequency, potential for harm, relevancy for a new licensee)?

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14. Describe the job/task analysis data collection methods. Include a copy of the final report with

details such as sampling methodology, sample size, and other pertinent details.

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15. What is the approximate reading level of this examination? (in school grade level)

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16. If there is a legal challenge on the validity of this examination or to specific items by a candidate, would your organization or the testing company developing this examination defend the examination's validity or items?

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17. Would your organization or the testing company developing the examination cover the cost of legal defense of this examination?

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**NEW ITEM WRITING AND REVIEW**

18. Briefly describe how subject matter experts are selected for item writing and their qualifications. Include information on regions of the country represented, average years of experience in the field, and any other information you consider pertinent.

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19. How many subject matter experts review each item for both accuracy and relevancy to the practice?

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20. Do item writers also serve as item reviewers?

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21. Describe your item writing **and** item review procedures. Include training methods and procedures for submitting items (e.g., mailed-in versus workshop.) Please provide a copy of your item writing and review manual or guidelines.

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**RELIABILITY OF ITEMS**

22. Are new items field tested prior to use on this examination? If so, what method is used (e.g., inclusion of field test items in regular exam administrations)?

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23. How often is a statistical item analysis performed? Indicate who reviews the item analysis and what action is taken on poorly performing items.

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24. Please provide reliability coefficients (e.g., KR-20) for the last three examinations.

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**ASSOCIATION ROLE**

25. Who is currently responsible for **development** of the examination?

- Association only
  - Testing company on ongoing contract
  - Testing company on consult/as-needed basis
  - Jointly by association and testing company
  - Other(specify)\_\_\_\_\_
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26. Who is currently responsible for the **scoring** of the examination?

- Association only
  - Testing company on ongoing contract
  - Testing company on consult/as-needed basis
  - Jointly by association and testing company
  - Other(specify)\_\_\_\_\_
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27. Who is currently responsible for **overseeing the psychometric aspects** of the examination?

- Association only
  - Testing company on ongoing contract
  - Testing company on consult/as-needed basis
  - Jointly by association and testing company
  - Other (specify) \_\_\_\_\_
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28. Who **establishes the security guidelines** for this examination?

- Association only
  - Testing company on ongoing contract
  - Testing company on consult/as-needed basis
  - Jointly by association and testing company
  - Other (specify) \_\_\_\_\_
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29. Who oversees **enforcement of the security guidelines** during examination **development**?

- Association only
  - Testing company on ongoing contract
  - Testing company on consult/as-needed basis
  - Jointly by association and testing company
  - Other (specify) \_\_\_\_\_
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30. Who oversees **enforcement of the security guidelines** during examination **administration**?

- Association only

- Testing company on ongoing contract
- Testing company on consult/as-needed basis
- Jointly by association and testing company
- State Board administering the examination
- Other (specify) \_\_\_\_\_

31. Who oversees **enforcement of the security guidelines** during examination **scoring**?

- Association only
- Testing company on ongoing contract
- Testing company on consult/as-needed basis
- Jointly by association and testing company
- Other (specify) \_\_\_\_\_

32. Indicate who has **legal ownership** of the examinations and the item banks.

- Association exclusively
- Testing company exclusively
- Jointly by association and testing company
- Other (specify) \_\_\_\_\_

33. If a testing company is indicated above, provide the name(s) of the testing company(s). If more than one testing company is used, also cite which services are provided by each company.

Company Name: \_\_\_\_\_ Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: (\_\_\_\_\_) \_\_\_\_\_ Fax #: (\_\_\_\_\_) \_\_\_\_\_

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

Services: \_\_\_\_\_

34. Include a copy of the document or affidavit, signed by the association, which establishes the relationship between the association and the testing company.

**EXISTING ITEM BANK**

35. How many **usable** items are in the item bank(s) for this examination?

\_\_\_\_\_

36. What information is stored on each item in the item bank? (e.g., item statistics, item review dates, author, references, etc.)

\_\_\_\_\_

\_\_\_\_\_

37. How often is the item bank reviewed for currency by subject matter experts? Include how many

subject matter experts are used.

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38. Is the item bank stored in an automated item banking system? If so, describe briefly.
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**SCORING AND MINIMUM PASSING**

39. What quality control procedures are used to assure the accuracy of the scores? (e.g., hand scoring, double scanning, etc.)
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40. Is the passing score based on a particular percent correct, a standard setting technique (e.g., Angoff), or norm-referenced (e.g., one standard deviation below the mean score of a reference group)?
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41. If applicable, when was the most recent standard setting study conducted?
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42. If applicable, how many of the subject matter experts used for the standard setting had less than three years of experience as a licensed professional in the field?
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43. If applicable, describe the standard setting procedure used (include the number of subject matter experts involved and their qualifications.)
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44. If a criterion referenced or content based standard setting approach is used, is a new passing score set for each administration of the examination or are subsequent forms equated back to previous forms?
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45. If applicable, what equating method is used?
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**ADMINISTRATION OF EXAMINATION**

46. Who is currently responsible for the **administering** the examination?  
 Association only  
 Testing company on ongoing contract  
 Testing company on consult/as-needed basis  
 Jointly by association and testing company  
 Other specify) \_\_\_\_\_

47. If a testing company is indicated above, provide the name(s) of the testing company(s). If more than one testing company is used, also cite which services are provided by each company.

Company Name: \_\_\_\_\_ Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: (\_\_\_\_\_) \_\_\_\_\_ Fax #: (\_\_\_\_\_) \_\_\_\_\_

Services: \_\_\_\_\_

48. Is this examination administered via paper/pencil or computer?

\_\_\_\_\_

49. How frequently are new forms of this examination produced?

\_\_\_\_\_

50. How frequently is this examination administered? In what locations?

\_\_\_\_\_

\_\_\_\_\_

51. How much time are candidates given to complete this examination? (list parts separately)

\_\_\_\_\_

52. If possible, include a copy of the examination administration manual which includes security procedures.

**SECURITY OF EXAMINATION**



53. Describe the security of the **physical** facility where the examinations and/or item bank are stored. (e.g., building security, vault security, electronic security, etc.)

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54. If an automated item banking system and/or an electronic examination delivery system is used, briefly describe the security of the system(s).

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55. For paper/pencil examinations, where are examinations stored prior to shipment (e.g., room, vault, locking cabinet, etc.)?

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56. Describe the security guidelines in force during all phases of the examination process. (e.g., item writing, item review, examination preparation, printing, delivery, return of materials, etc.) Supply a copy of these guidelines if possible.

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57. Who, in addition to those actually involved in test development or test administration, has access to this examination (e.g., is examination sent to Boards or professional organizations for review)?

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58. Describe any security breaches against this examination during the past three years.

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### **CANDIDATE ELIGIBILITY AND NOTIFICATION**

59. Does your organization have an established set of eligibility criteria which candidates must meet prior to being permitted to sit for this examination (e.g., minimum educational requirements)? If yes, please attach a copy of these requirements.

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60. Please provide a copy of any descriptive information (e.g., Candidate Information Booklet) that is prepared for examinees. If an additional fee is charged for this information (beyond the purchase price for this examination), what is the fee?
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**SCORE REPORTING**

61. What kinds of scores are reported (e.g., percent correct, scaled scores, pass/fail status only)?
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62. If scores other than percent correct are reported, please provide an equivalent percent correct for the passing scores on the last three examinations.
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63. How are candidate scores transmitted to the state board or regulatory agency?
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64. Are written grade reports sent to the candidate by the national association or its testing vendor? If yes, include a copy of a sample grade/score report and any interpretation guide.

**CANDIDATE REVIEW OF EXAMINATION**

65. Are failing candidates permitted to review a copy of the examination and the answer key? If yes, indicate what fee, if any is charged per candidate.
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66. Would you (the provider) respond to objections/challenges to examination items submitted by Florida candidates?
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67. May Florida obtain a copy of the examination for review by the Board and/or our consultants (we would be willing to meet your security requirements)?

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**VENDOR SERVICES**

68. Should Florida wish to use this examination for licensure purposes, could Florida administer the examination or would we need to contract with you for administration services?

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69. May Florida establish its own test dates or additional test dates if necessary?

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70. May Florida set its own minimum passing score if desired?

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71. May Florida provide post-examination review to failing candidates in Florida?

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72. May Florida send the grade report to the candidate?

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73. Do examinees remit fees directly to your organization or are fees collected by the user of the examination (e.g., the state Board office)?

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74. Does Florida need to become a member of your national organization in order to purchase or use the examination? If yes, indicate the amount of the membership and annual fee.

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**VENDOR FEES**

75. What would be the fee for Florida to use this examination for licensure purposes (per candidate)?

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76. Indicate the contact person for questions regarding this survey:

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: (\_\_\_\_\_) \_\_\_\_\_ Fax #: (\_\_\_\_\_) \_\_\_\_\_

**CERTIFICATION STATEMENT**

78. Certification: The undersigned hereby certifies that all responses to this survey are correct to the best of his or her knowledge.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
(Print)

Checklist of Enclosures:

- copy of the Job Analysis Report (with sampling, survey instrument, methods, results, etc. (Question #14)
- item writing/review procedures; including training methods and procedures (Question #21)
- examination administration manual which includes security procedures (#52)
- copy of security guidelines for all phases of exam development and administration (#56)
- candidate eligibility criteria (#59)
- copy of Candidate Information Booklet or other information to candidates (#60)
- sample grade/score report and any interpretation guide (#64)