



D&S Diversified Technologies LLP
Headmaster LLP

D&S DIVERSIFIED TECHNOLOGIES (D&SDT), LLP - HEADMASTER, LLP
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Innovative, quality technology solutions throughout the United States since 1985.

Test Administration Services Entity (TASE)
TEST ADMINISTRATION SERVICES AGREEMENT
TASE FORM 1505 | MASSACHUSETTS MAP

PARTIES

HIRING AGENT: D&S Diversified Technologies, LLP and/or HEADMASTER, LLP (COMPANY)
 P.O. Box 6609
 Helena, MT 59604–6609
 Phone #: (888)401-0462 | Fax: (406)442-3357
 Email: hdmaster@hdmaster.com Website: www.hdmaster.com

TESTING SERVICES BUSINESS NAME: _____ (TASE)

FEIN: _____ Secretary of State ID#: _____

Contact Name: _____ Telephone #: _____

Address: _____ City: _____ State: _____ ZIP: _____

Email: _____ Website: _____
(optional)

PURPOSE

COMPANY executes this agreement for Test Administration Services with the herein-named TASE (Business Entity) as established to do business by statute in the State of Massachusetts.

OBLIGATIONS

COMPANY will:

- Obtain and provide information, per State regulations, about the dates and locations needed for test administration.
- Provide a schedule of test administrations needed Statewide through our test administration software (Testing Opportunities).
- Provide secure access to the Statewide test schedule allowing TASEs to select testing opportunities desired.
- Periodically check to confirm TASE has Worker’s Compensation insurance per State regulations.
- Provide timely access to COMPANY’s toll-free support system and cloud-based test management software required by the State.
- Monitor that testing sites are safe, clean, and reasonably free of distractions per State-approved test site requirements.
- Facilitate periodic review of test administrations upon request of TASE, State officials, or COMPANY to ensure compliance with state standards and improve future test administration experiences for test candidates.
- Notify TASE of any deficiencies found in periodic reviews and in test packet materials (printed or electronic) submitted to COMPANY.



- Compensate TASE for each test administration generally within seven (7) business days, but no later than thirty (30) calendar days of COMPANY receiving the timely submission of test materials for official scoring.

TASE will:

- Perform at least three test administrations per year.
- Provide timely, quality, non-biased test administration services that comply with State and Federal law.
- Hire, supervise and compensate test administration teams (test team) that include:
 - Registered Nurse / Pharmacist Test Observer(s) (TO) to administer the skills test portion of the exam
 - Certified Knowledge Test Proctor(s) (KTP)
- Provide all necessary electronic testing equipment that is compatible with COMPANY's software.
- Provide all testing supplies needed, as required by the State, to administer tests to State and Federal standards.
- Provide secure Hotspot, Wi-Fi/internet access for the test team.
- Provide COMPANY proof of:
 - Test team member's state-required testing eligibility.
 - Annual recertification of testing eligibility.
 - TASE's business entity formation status.
 - TASE's Worker's Compensation insurance coverage per State regulations.
 - General liability insurance is not required, but highly recommended for your business entity.
- The team understands and will comply with all State and Federal regulations, including but not limited to:
 - State Approved Testing Standards (see Attachment A found at www.hdmaster.com, under the 'Business Entities Providing Testing Services' heading).
 - Americans with Disabilities Act (ADA).
 - Recent criminal background checks for applicable testing team members per State requirements.
 - Agreeing to the Monitoring and Statistical Analysis of their Test Observer(s) (TOs) and other test team members.
- Avoid conflicts of interest including but not limited to an RN / Pharmacist or any test team member administering the test of a family member, friend or person they trained or had professional contact with during training when testing candidates in Massachusetts.
- Correctly submit testing packet materials (printed and/or electronic) to COMPANY the same day tests are administered.
- Assume responsibility for the team's State and Federal taxes and withholdings.
- Assume liability for failure to complete test administrations that comply with this agreement and applicable regulations.

COMPENSATION

COMPANY will pay TASE:

- During the first year of this agreement, \$13 per test for each medication administration successfully administered and then \$20 per test successfully administered in subsequent years.
- During the first year of this agreement, \$13 for each Knowledge Test successfully administered and then \$15 per test successfully administered in subsequent years.
- Fifty dollars (\$50.00) for each Test Observer who agrees to provide services as a state-approved Mentor Test Observer per State approved expectations.
- Twenty dollars (\$20.00) for each administration requiring accommodations to comply with ADA requirements.



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TASE will pay COMPANY:

- A one-time fee of one-hundred dollars (\$100.00 per Skill Test Observer) to certify that each TO has the necessary qualifications to administer exams that meet State testing standards.
- Seventy-five dollars (\$75.00) yearly for review and oversight per State-approved processes.
- Five dollars (\$5.00) per test day for access to COMPANY’s toll-free phone support and cloud-based test management software as contracted by the State.
- Twenty-five dollars (\$25.00) per fifteen minutes of COMPANY staff time needed to correct erroneous or disorganized test administration materials submitted for official scoring to COMPANY by TASE’s test team(s).

TERMINATION

Either party may terminate this Agreement by choosing not to offer or accept work from the other. COMPANY may terminate this agreement if it does not receive testing materials from TASE as required per State standards presented in Attachment A, found at www.hdmaster.com, under the ‘Business Entities Providing Testing Services’ heading.

AGREED

D&S Diversified Technologies, LLP
 HEADMASTER, LLP (COMPANY)

 TASE Contact Signature

Date: _____

PAYMENT INFORMATION

\$100 CERTIFICATION AND TRAINING FEE PAYMENT

MasterCard or VISA credit/debit card information:		
Credit/Debit Card #: _____	Expiration Date: _____	Zip Code: _____
Printed Name as it Appears on Credit/Debit Card: _____		
Authorized Cardholder Signature: _____		