Testing Center – assessment / test / quiz

Application - missed test

Date of request:

If possible attach the assessment to this application – Ther original test date Staff in the testing center will find an attack them from a study hall etc Please submit this to telectronically.	appropriate time for the student to take the assessment and
Teacher:	
Class/course:	<u>a</u>
Date of original test:	Period:
Students:	
-→	
	*
Are there any special requests?	:
Signature of Teacher requesting approval for use of the testing center	
Approved by Building Principal	

This should be routed to the testing center after approval.