TANGIPAHOA PARISH SCHOOL SYSTEM
EST. 1896

# STATE PLACEMENT TEST APPLICATION

***INSTRUCTIONS:** Complete this application (please print) and email to Amy Ard, (amy.ard@tangischools.org). Once the application is received, the school will telephone the parent/guardian to schedule testing dates (a one-two-day assessment). For further information, you may contact Amy Ard via email or telephone (985- 474-8941.)*

## STUDENT INFORMATION

**LAST NAME:** _____ **FIRST NAME:** _____

**SOCIAL SECURITY NUMBER:** _____ **DATE OF BIRTH:** _____

**GENDER: MALE** ☐ **FEMALE** ☐ **RACE:** _____ **GRADE:**_____

**Migrant:** ☐ **EL:** ☐ **504:** ☐ **IEP:** ☐ **Homeless:** ☐ **Foster Care:** ☐ **Military Affiliation:** ☐

**PUBLIC SCHOOL ATTENDING:** _____

****All of the above information is required for testing. ****

**CHECK ONE:**

☐ **STUDENT QUALIFIES FOR ACCOMMODATIONS.**

*NOTE: A COPY OF THE STUDENT'S CURRENT IEP, IAP, OR EL CHECKLIST MUST BE PROVIDED FOR THE STUDENT TO RECEIVE ACCOMMODATIONS.*

☐ **STUDENT DOES NOT QUALIFY FOR ACCOMMODATIONS.**

## PARENT/GUARDIAN INFORMATION

**LAST NAME:** _____ **FIRST NAME:** _____

**MAILING ADDRESS:** _____

CITY ZIP

**TELEPHONE:** _____ **EMAIL:**_____

**SIGNATURE OF PARENT/GUARDIAN:** _____ **DATE:** _____