For Office Use Only:
Date Rec'd_____

Amount Rec'd_____
Check# _____ Cash____ Initial_____

Contacted____ Date___/____/__ Initial_____

# FAITH ACADEMY OF MARBLE FALLS
## PLACEMENT TESTING REGISTRATION FORM
Dates for Fall 2024 enrollment

In order to complete registration for placement testing, please fill out and return this form with your one-time testing fee of $50 to Faith Academy. You must register at least 24 hours in advance for testing. Please complete one form per student and **submit academic records (report card or transcript).**

**STUDENT INFORMATION:**

Student Name: _____current / sibling / new (Circle one)

Applying for grade: _____Age: _____ Date of Birth: _____

Last School Attended: _____

Does your student have an IEP or 504? _____

Has your child had academic accommodations or modifications in the classroom:
- ❑ Dyslexia ☐ ADHD/ADD ☐ Dysgraphia
- ❑ Other _____

**TESTING FOR ENROLLMENT:** **Student plans to enter Fall 2024 yes ___ other ___**
Please check one of the following:
- ❑ This is my child's first time to test at Faith Academy.
- ❑ My child has tested at Faith Academy before. Please list the last approximate test date. ___/___/___

**Testing is based on the grade for which the student is applying. Please circle the level for which your child intends to enroll.** Please note that results may warrant additional testing.

English: K 1st 2nd 3rd 4th 5th 6th 7th 8th 9th 10th 11th 12th

Math: K 1st 2nd 3rd 4th 5th 6th 7th Pre-Algebra Algebra I Geometry

Algebra II Pre-Cal Calculus

Science: (applies to 10th-12th grades) Chemistry (10th) Advanced Science (11th-12th)

**PARENT INFORMATION:**

Parent(s) name(s) _____

Phone number where you may be reached while your child is testing_____

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**Contact Kim Hansard to schedule a day/time for K-2nd placement testing. Testing for students entering 3rd-12th grades is on Mondays or Thursdays at 11 a.m. Testing will not be available March 11-15, 2024 or May 15, 2024. Beginning May 22, 2024, testing will be on Wednesdays at 10 a.m.**

**Please indicate what date you will be here for testing: _____**
**Testing must be scheduled 24 hours in advance.**

**Please check-in at the Faith Academy office 10 minutes prior to your testing time.**