

IOWA TESTING STATISTICS FORM

Most of the below information is requested by the IOWA test administration and completed on each test booklet by the tester. Parents, **please complete one form per student.**

PARENT Name _____

Address: _____

Contact Numbers (used by TLC only) (home) _____ (cell) _____

Email Address (used by TLC only) _____

€ We are current members of TLC Homeschoolers

€ We are **NOT** members of TLC. I have enclosed a \$20 family test fee payable to Tina Jacobi.

STUDENT Name: _____ Gender: MALE or FEMALE

Does your child have an allergy or medical condition we need to be aware of during testing:

Full Birth date: _____ Current Grade: _____ Test Level Ordered: _____

Race/Ethnicity (mark all that apply):

- € American Indian or Alaskan Native
- € Asian
- € Black or African American
- € Hispanic or Latino
- € Native Hawaiian or Other Pacific Islander
- € White
- € Other

This form must be accompanied with your BJU Press Homeschool Order Form as well as your payment to BJU Press Testing & Evaluation.

Please don't forget to include tax in your calculation.

A return shipping fee of \$3 PER TEST will be due on the first day of testing.