

Wakulla County Schools

Statewide Testing Enrollment Form

Submit complete enrollment form to Sue Anderson via fax at (850) 926-0124; US mail, 69 Arran Road, Crawfordville, FL; or e-mail sue.anderson@wcsb.us.

Contact Sue Anderson at (850) 926-0065, #246 for additional help or questions.

Test(s) Requested: _____

Student Name: _____

Student ID: _____

Date of Birth: _____ (mm/dd/yyyy)

School: (Please circle one) Home School Private School

Grade Level: _____ (current grade level)

Gender: _____ (M/F)

Ethnicity: Hispanic/Latino _____ (Yes/No)

Race: Circle all that apply.

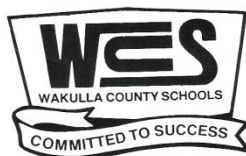
American Indian

Asian

Black or African American

Native Hawaiian or Other Pacific Islander

White



Contact Name (parent/guardian): _____

Contact Number: _____

Today's Date: _____

****Please bring a photo ID on the day of testing (students may have parents show their ID, if necessary).**

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