



**(D) ADDITIONAL INFORMATION**

<b><u>Ethnicity:</u></b> <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Not Hispanic/Latino	<b><u>Gender:</u></b> <input type="checkbox"/> Female <input type="checkbox"/> Male
<b><u>Race:</u></b> <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian/Pacific Islander <input type="checkbox"/> White	<b><u>Date of Birth:</u></b> _____

**(E) PROGRAM Verification** (Please indicate the program you are completing or have completed at Tarleton.)

<input type="checkbox"/> <b><u>Traditional Teacher Education Program</u></b> <input type="checkbox"/> EC-6 <input type="checkbox"/> 4-8 <input type="checkbox"/> All-Level Special Education w/EC-6 <input type="checkbox"/> Secondary (6-12 or 8-12) <input type="checkbox"/> All-Level (EC-12)	<input type="checkbox"/> <b><u>Graduate/Professional Level Certification Program</u></b> <input type="checkbox"/> Principal <input type="checkbox"/> NCELP <input type="checkbox"/> School Counselor <input type="checkbox"/> Superintendent <input type="checkbox"/> Reading Specialist <input type="checkbox"/> MRT <input type="checkbox"/> Educational Diagnostician
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**(F) Student Affidavit:**

To the best of my knowledge, I have fulfilled all of the eligibility requirements for the test for which I am registering. I have accurately completed this **Test Approval Request Form** and understand it must be submitted by the **Tarleton Deadline** in order to be processed in time to register for the test administration for which I have requested. **I assume all responsibility for the accuracy of my Test Approval Request Form. I am aware that I am responsible for any discrepancies or errors that ETS may discover in my registration and any additional fees that may be incurred.**

\_\_\_\_\_  
**Student's Signature**

\_\_\_\_\_  
**Date**

**(G) Department Verification** (to be obtained by Testing Coordinator):

The program coordinator/department head listed below has verified that the above named student meets eligibility requirements to register for the test indicated.

\_\_\_\_\_  
**Program Coord./Department Head Signature**

\_\_\_\_\_  
**Date**

**(H) Testing Coordinator for Certification:**

I verify that the student meets eligibility requirements to register for the test indicated.

\_\_\_\_\_  
**Testing Coordinator's Signature**

\_\_\_\_\_  
**Date**

- ▶ Students are responsible for submitting this **Test Approval Request Form** when requesting to register online. This form must be submitted to the Testing Coordinator for Certification by the **Tarleton Registration Deadline**. Failure to meet this deadline may result in the student having to pay late or emergency registration fees.
- ▶ Students who want to register using the paper registration method must request the registration form from Ms. Sue Owens either by phone at 254-968-1908 or by email at [owens@tarleton.edu](mailto:owens@tarleton.edu). The completed registration form and fee must be submitted to the Testing Coordinator by the **Tarleton Registration Deadline**.