

# Request to Retest Form

## For Secondary and All-Level Certification Areas

### For PPR Retest Approval

Submit this completed form and include a copy of your most recent TExES score report in a single email to Dr. Elizabeth Garcia at [degarcia@tarleton.edu](mailto:degarcia@tarleton.edu) so appropriate areas of remediation can be assessed. You will be notified concerning the requirements you need to complete to obtain retest approval. **Once completed, submit all required documentation back to Dr. Garcia.**

### For Content Area Test Approval

Submit this completed form and include a copy of your most recent TExES score report in a single email to the Department Head or Education Program Coordinator for your academic department so appropriate areas of remediation can be assessed. Your academic department will determine the requirements you will need to complete to obtain retest approval. **A departmental signature will be required on the second page of this form.**

**Candidates will need to monitor their Pearson testing account for entered retest approval once all requirements have been completed, submitted, reviewed, and approved by the appropriate department. Expect 5-7 working days for approvals to be processed and entered.**

Name:	Today's Date:		
TSU ID#	TEA ID#		
Clinical Teaching Semester:	Fall	Spring	Year:
Telephone #:	Email:		

I am requesting permission to retest the following exam:

EC-12 PPR (route approval for this exam through Dr. Garcia)

Content Exam (route approval for this exam through your content academic department)

Name of Exam \_\_\_\_\_

I have taken the above indicated exam \_\_\_\_\_ times to date.

Date of last attempt \_\_\_\_\_.

*Approver - continue to next page*

After the candidate has completed the remediation requirements for the named exam and has received retest approval including departmental signature below, this form should be forwarded to Brenda Strong, Box T-0790, Math room 101D, or [strong@tarleton.edu](mailto:strong@tarleton.edu). Retest approval should only be granted once all remediation requirements have been fulfilled and the approver is satisfied with the candidate's content mastery.

Candidate or approver, please include a detailed description of everything the candidate has been required to complete to show proof of retest readiness.

The above teacher education candidate has permission to retest the named exam.

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Name of Approving Department

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Printed Name of Approver

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Signature of Approver

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Date of Approval