

## **Prior Notification Form**

TASC – Test Assessing Secondary Completion™

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## **Prior Notification Form**

The examinee should complete the top portion of this form and submit a copy to the test center where the examinee will be testing. The form should be submitted at the time of scheduling so that the test center can arrange to make allowable resources available to the examinee on the day of testing. The list of allowable resources, which indicates which resources require submission of a Prior Notification Form, can be found on the TASC Test website at: <a href="http://www.tasctest.com">http://www.tasctest.com</a>. Braille, large print, or Spanish versions of the test can be arranged via the normal test scheduling process.

First Name:	Last Name:			
Examinee ID Numb	per: Da	te of Birth:	Age:	
Mailing Address:				
City:	State:		Zip:	
Phone Number:	Em	ail:		
Examinee's Signatu	ıre:		Date:	
Mode of Administra	ation:   Paper-Based Te	st 🗆 Com	puter-Based Test	
Applicable Subtest(	s):			
□ Reading	Test Date/Time:	Uriting	Test Date/Time:	
☐ Math	Test Date/Time:	□ Science	Test Date/Time:	
☐ Social Studies	Test Date/Time:			
	s: (Please indicate what resource brief explanation of the reason t	· ·	have available for each applicable d.)	
For TASC Test Coord	linator Use:			
TASC Test Coordinator Name:			Test Center ID:	
Test Center Name:				
Phone Number:	Fax Numbe	er:	Email:	
I have reviewed this	request form. The request form	is complete; all no	ecessary information is included.	
TASC Test Coordina	ator Signature:		Date:	

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