Placement Test Request

The Iowa Tests of Basic Skills
Grades 5 and 9

Test must be administered within 10 days of enrollment

Student ___________________________ Social Security _______ Date of Birth ____________

Enrolling School ___________________________ Last school attended _______ (Parish) ______

Test Coordinator or Counselor (type or print) ___________________________

Signature _____________________________________________________________________

Date ___________________________________________________________________

Please submit this form to the Accountability, Assessment, and Evaluation Department (Christa McAuliffe Center). Once the test is scheduled, the Test Coordinator or Guidance Counselor will be responsible for picking up and returning the test.

The Accountability, Assessment, and Evaluation Department will score the test and report the results. All rules and procedures outlined in the State and District Test Security Policy apply to this test.

The test must be administered within 10 days of student enrollment in the school. If you have questions concerning this placement test, call 226-7625.