

# Online Tech Prep Registration Assistance Form

Program: \_\_\_\_\_

Teacher: \_\_\_\_\_

Last Name	First Name	MI	Social Security Number
Home Address (#, Street, City, State, Zip)			
Home Phone Number	Date of Birth	Gender	
(   )		<input type="checkbox"/> Male <input type="checkbox"/> Female	
Race (optional)			
<input type="checkbox"/> African American (1) <input type="checkbox"/> American Indian/Alaskan Native (2) <input type="checkbox"/> Asian/Pacific Islander (3) <input type="checkbox"/> Hispanic (4) <input type="checkbox"/> Caucasian/White (5)			
Home School	Grad Year		
Student Signature	Date		

Additional Notes:

ACCUPLACER SCORES				
Date:	Arithmetic	Math	Reading	Writing

