

SCHOOL RECORD OF EXAMINATIONS REQUESTED: AUGUST 2010

This form may be photocopied by the school and used in any of several ways:

- As a worksheet for preparing your school's online request submission to the Department
- For circulation to department chairpersons, special education coordinators, and other school officials for reporting their examination needs to your school's central office on a subject-by-subject basis
- For distribution to other principals in your district when your school is requesting quantities of test booklets for use in other schools

Be sure to retain in your files the final version of this form which matches the online request submitted to the Department. You will need to use that version for checking your confirmation notice, which will be sent to you by e-mail within three business days of the submission of your school's examination request.

School Name _____ **Date** _____

REGENTS EXAMINATIONS

TITLE	Regular	Large Type	Braille
Comp English			
Living Environment			
Physical Setting/ Chemistry			
Physical Setting/ Earth Science			*
Integrated Algebra			
Geometry			
Algebra 2/ Trigonometry			
Global History & Geography			
U.S. History & Government			

REGENTS COMPETENCY TESTS

TITLE	Regular	Large Type	Braille
Mathematics	*	*	*
Science	*	*	*
Reading	*	*	*
Writing			
Global Studies	*	*	*
US Hist. & Govt.	*	*	*

* Available in Restricted Form only. Each copy of a restricted test is numbered and sealed in its own envelope and must be returned, whether used or unused, to the Department at the end of the examination period.

Request only the exact number of restricted booklets required. *Do not request sample copies or extra copies.*

Summer school administrators are responsible for returning all restricted examination materials, used and unused, shipped to their school.