

<b>A. Student Information</b>				
		TACHS ID	Phone Number	Birth Date
Last Name	First Name	M.I.	Male	Female
Last Name of Parent/Guardian (if different)		E-mail Address		
Mailing Address	Apt. #	City	State	Zip Code
Catholic Parish (if applicable)		Current School and County/Location		
Send Applicant Record to high schools listed below:				
1st				
2nd				
3rd				

<b>B. School Record</b>				
	Gr. 6	Gr. 7	Gr. 8	
Religion				
English Language Arts (ELA)				
Mathematics				
Social Studies				
Science				
Foreign Language (specify)				

<b>C. Personal Progress</b>				
	Gr. 6	Gr. 7	Gr. 8	
Conduct				
Effort				
Days Late				
Days Absent				
Will student take any Regents exams in June?	YES	NO		
If yes, what subjects?				

<b>D. Standardized Test Record</b>											
<b>NY State Testing</b>	Grade 6		Grade 7		<b>TerraNova</b>	Grade 6		Grade 7		Grade 8	
	Performance Level		Performance Level			Nat'l %ile		Nat'l %ile		Nat'l %ile	
ELA Test					Reading Total						
Mathematics Test					Language Total						
					Mathematics Total						

**E. Comments**

Please place school stamp or seal in this box.

\_\_\_\_\_  
 Date                      Person completing this form                      Title                      Phone

**By registering for the TACHS, you consent to the release of the information contained on this form and all school records about your child. Due date to each of the high schools is December 14, 2018. DO NOT RETURN TO THE TACHS EXAMINATION OR DIOCESAN OFFICES.**