

# ***Brevard Christian Home Educator's Year End Testing for Kindergarten through 12<sup>th</sup> grade.***

BCHE/CHA will be administering the Stanford Achievement Test 10 on April 3<sup>rd</sup>, 4<sup>th</sup> , & 5<sup>th</sup>. Location: Faith Presbyterian Church, 1900 S. Tropical Trail. Merritt Island, FL 32952. This is standardized end-of-year testing available to any BCHE/CHA student. This test will satisfy Brevard County superintendent's requirements for homeschooler's annual tests. Please note, we have an on-site FL licensed teacher but not every proctor is a certified teacher. Coordinators for this year's testing are Rene Hunt and Janet Jackson.

## ***Information Sheet (retain for your records)***

- Test registration must be postmarked by March 1, 2017. Late registrations will be returned.
- Registration confirmation and information notices will be sent to you along with a test schedule after March 1<sup>st</sup>.
- One adult per family must volunteer to assist with testing (exceptions made for Mothers with young children).
- Testing is for those students currently enrolled in BCHE/CHA.
- The Otis Lennon Test will be given with the Stanford Achievement Test to all students in the 4<sup>th</sup> thru 12<sup>th</sup> grade. This test is to measure aptitude in reasoning (the benefit of this test is to determine if you are pushing your student too hard, or not hard enough).
- Cost is \$40.00 per student. Make checks payable to BCHE.
- Mail check and completed registration form (below) to:
  - BCHE testing
  - P.O. Box 540067
  - Merritt Island, FL 32954-0067

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*keep the top half and return the bottom half with payment*

## ***2017 year end testing registration form***

Parent's name: \_\_\_\_\_ Phone no. \_\_\_\_\_

Mailing address: \_\_\_\_\_

Are you a certified teacher? Yes no (circle one)

Do we need to know anything special about your child? Yes no (circle one)

\*If yes, please include an explanation on reverse side.

Do you have preschool children? Yes no (circle one)

### **Student information (use legal name):**

Last name, First, Middle	Race	Birthdate	Testing Grade	CHA?
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\_\_\_\_\_  
M F \_\_\_\_\_ yes no

\_\_\_\_\_  
M F \_\_\_\_\_ yes no

\_\_\_\_\_  
M F \_\_\_\_\_ yes no

Indicate your choice of volunteer position. Write your preference for 1<sup>st</sup>, 2<sup>nd</sup>, and 3<sup>rd</sup> choice:

Test Proctor	Classroom Monitor	Other (explain)
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