

Print in CAPITAL LETTERS. Use black or blue ink (no pencil) to fill in all information. All items in red must be completed. Follow instructions in the *Registration and Questionnaire Booklet* for SAT School Day to complete all pages of the form. Do not staple anything to this form.

<p>1 NAME (REQUIRED) Enter your legal name, including hyphens, apostrophes, and spaces. Omit suffixes such as Jr. or III. If you have an Admission Ticket, copy your name exactly as it appears on the ticket (as space allows).</p> <p>LAST NAME/Family Name/Surname – first 35 letters <input style="width:100%; height: 15px;" type="text"/></p> <p>FIRST NAME/Given Name – first 20 letters <input style="width:100%; height: 15px;" type="text"/></p> <p>M.I. <input style="width: 20px; height: 15px;" type="text"/></p>	<p>2 REGISTRATION NUMBER (REQUIRED) Print the 10-digit Registration Number found on your Admission Ticket and fill in the corresponding ovals. If you do not have an Admission Ticket, ask your counselor for this number.</p> <p style="text-align: center;"> <input style="width: 100%; height: 15px;" type="text"/> <input type="radio"/>0 <input type="radio"/>1 <input type="radio"/>2 <input type="radio"/>3 <input type="radio"/>4 <input type="radio"/>5 <input type="radio"/>6 <input type="radio"/>7 <input type="radio"/>8 <input type="radio"/>9 <input type="radio"/>1 <input type="radio"/>1 <input type="radio"/>1 <input type="radio"/>1 <input type="radio"/>1 <input type="radio"/>1 <input type="radio"/>1 <input type="radio"/>1 <input type="radio"/>1 <input type="radio"/>1 <input type="radio"/>2 <input type="radio"/>2 <input type="radio"/>2 <input type="radio"/>2 <input type="radio"/>2 <input type="radio"/>2 <input type="radio"/>2 <input type="radio"/>2 <input type="radio"/>2 <input type="radio"/>2 <input type="radio"/>3 <input type="radio"/>3 <input type="radio"/>3 <input type="radio"/>3 <input type="radio"/>3 <input type="radio"/>3 <input type="radio"/>3 <input type="radio"/>3 <input type="radio"/>3 <input type="radio"/>3 <input type="radio"/>4 <input type="radio"/>4 <input type="radio"/>4 <input type="radio"/>4 <input type="radio"/>4 <input type="radio"/>4 <input type="radio"/>4 <input type="radio"/>4 <input type="radio"/>4 <input type="radio"/>4 <input type="radio"/>5 <input type="radio"/>5 <input type="radio"/>5 <input type="radio"/>5 <input type="radio"/>5 <input type="radio"/>5 <input type="radio"/>5 <input type="radio"/>5 <input type="radio"/>5 <input type="radio"/>5 <input type="radio"/>6 <input type="radio"/>6 <input type="radio"/>6 <input type="radio"/>6 <input type="radio"/>6 <input type="radio"/>6 <input type="radio"/>6 <input type="radio"/>6 <input type="radio"/>6 <input type="radio"/>6 <input type="radio"/>7 <input type="radio"/>7 <input type="radio"/>7 <input type="radio"/>7 <input type="radio"/>7 <input type="radio"/>7 <input type="radio"/>7 <input type="radio"/>7 <input type="radio"/>7 <input type="radio"/>7 <input type="radio"/>8 <input type="radio"/>8 <input type="radio"/>8 <input type="radio"/>8 <input type="radio"/>8 <input type="radio"/>8 <input type="radio"/>8 <input type="radio"/>8 <input type="radio"/>8 <input type="radio"/>8 <input type="radio"/>9 <input type="radio"/>9 <input type="radio"/>9 <input type="radio"/>9 <input type="radio"/>9 <input type="radio"/>9 <input type="radio"/>9 <input type="radio"/>9 <input type="radio"/>9 <input type="radio"/>9 </p>										
<p>3 SEX (REQUIRED)</p> <p><input type="radio"/> Female <input type="radio"/> Male</p>	<p>4 DATE OF BIRTH (REQUIRED)</p> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">Month</td> <td style="text-align: center;">Day</td> <td style="text-align: center;">Year</td> </tr> <tr> <td style="text-align: center;"> <input style="width: 20px; height: 15px;" type="text"/> </td> <td style="text-align: center;"> <input style="width: 20px; height: 15px;" type="text"/> </td> <td style="text-align: center;"> <input style="width: 20px; height: 15px;" type="text"/> </td> </tr> <tr> <td style="text-align: center;"> <input type="radio"/>0 <input type="radio"/>1 <input type="radio"/>2 <input type="radio"/>3 <input type="radio"/>4 <input type="radio"/>5 <input type="radio"/>6 <input type="radio"/>7 <input type="radio"/>8 <input type="radio"/>9 </td> <td style="text-align: center;"> <input type="radio"/>0 <input type="radio"/>1 <input type="radio"/>2 <input type="radio"/>3 <input type="radio"/>4 <input type="radio"/>5 <input type="radio"/>6 <input type="radio"/>7 <input type="radio"/>8 <input type="radio"/>9 </td> <td style="text-align: center;"> <input type="radio"/>1 <input type="radio"/>9 <input type="radio"/>0 <input type="radio"/>0 <input type="radio"/>2 <input type="radio"/>0 <input type="radio"/>1 <input type="radio"/>1 <input type="radio"/>2 <input type="radio"/>3 <input type="radio"/>4 <input type="radio"/>5 <input type="radio"/>6 <input type="radio"/>7 <input type="radio"/>8 <input type="radio"/>9 </td> </tr> </table>	Month	Day	Year	<input style="width: 20px; height: 15px;" type="text"/>	<input style="width: 20px; height: 15px;" type="text"/>	<input style="width: 20px; height: 15px;" type="text"/>	<input type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9	<input type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9	<input type="radio"/> 1 <input type="radio"/> 9 <input type="radio"/> 0 <input type="radio"/> 0 <input type="radio"/> 2 <input type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9	<p>5 COLLEGE BOARD HIGH SCHOOL CODE (REQUIRED) Your school code can be provided by your counselor, or you can access it by visiting collegeboard.org/sat-codes.</p> <p style="text-align: center;"> <input style="width: 100%; height: 15px;" type="text"/> <input type="radio"/>0 <input type="radio"/>0 <input type="radio"/>0 <input type="radio"/>0 <input type="radio"/>0 <input type="radio"/>1 <input type="radio"/>1 <input type="radio"/>1 <input type="radio"/>1 <input type="radio"/>1 <input type="radio"/>2 <input type="radio"/>2 <input type="radio"/>2 <input type="radio"/>2 <input type="radio"/>2 <input type="radio"/>3 <input type="radio"/>3 <input type="radio"/>3 <input type="radio"/>3 <input type="radio"/>3 <input type="radio"/>4 <input type="radio"/>4 <input type="radio"/>4 <input type="radio"/>4 <input type="radio"/>4 <input type="radio"/>5 <input type="radio"/>5 <input type="radio"/>5 <input type="radio"/>5 <input type="radio"/>5 <input type="radio"/>6 <input type="radio"/>6 <input type="radio"/>6 <input type="radio"/>6 <input type="radio"/>6 <input type="radio"/>7 <input type="radio"/>7 <input type="radio"/>7 <input type="radio"/>7 <input type="radio"/>7 <input type="radio"/>8 <input type="radio"/>8 <input type="radio"/>8 <input type="radio"/>8 <input type="radio"/>8 <input type="radio"/>9 <input type="radio"/>9 <input type="radio"/>9 <input type="radio"/>9 <input type="radio"/>9 </p>
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<p>6 SAT SCHOOL DAY TEST INFORMATION (REQUIRED) Indicate the SAT School Day administration in which you are participating.</p> <p>Fill in only one oval.</p> <p><input type="radio"/> October 2016 <input type="radio"/> March 2017 <input type="radio"/> April 2017</p>											
<p>7 STUDENT ID NUMBER Your counselor will tell you if this field is required.</p> <p style="text-align: center;"> <input style="width: 100%; height: 15px;" type="text"/> </p>											
<p>8 MAILING ADDRESS You must supply your mailing address so that we know where to send your scores and your Admission Ticket (if you request a paper copy).</p> <p>Line 1 (Street address or P.O. Box) <input style="width: 100%; height: 15px;" type="text"/></p> <p>Line 2 (Apartment number if applicable) <input style="width: 100%; height: 15px;" type="text"/></p> <p>City <input style="width: 80%; height: 15px;" type="text"/> State <input style="width: 20%; height: 15px;" type="text"/></p> <p>ZIP Code <input style="width: 40%; height: 15px;" type="text"/> Phone Number - start with city or region code <input style="width: 60%; height: 15px;" type="text"/></p>		<p>9 EMAIL ADDRESS (STRONGLY RECOMMENDED) We strongly recommend that you provide an email address so that we can contact you with important information. By providing your email address, you are granting the College Board permission to use your email in accordance with the privacy policy in the <i>Registration and Questionnaire Booklet</i> for SAT School Day.</p> <p>Begin here. → <input style="width: 100%; height: 15px;" type="text"/> @ <input style="width: 100%; height: 15px;" type="text"/></p>									
<p>10 MOBILE NUMBER - For students with U.S. mobile numbers only:</p> <p style="text-align: center;"> <input style="width: 100%; height: 15px;" type="text"/> </p> <p>By providing your mobile number, you agree to receive text messages from the College Board about a test program for which you are registered, to participate in research surveys, and/or to receive free college planning services. If you have an unlimited text messaging plan, you will receive these messages at no additional cost; otherwise, standard text-messaging rates apply. You may also opt out at any time.</p>											

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