

PSAT Test Order Form

***Return to NORTH OR SOUTH CAMPUS GUIDANCE
by September 20, 2017 (Firm Deadline)***

Student's Name: _____ Graduation Year: _____

Yes, please sign my child up to take the PSAT on October 11, 2017.

I understand the following:

- My child will report to the North Campus West Gym no later than 7:30 A.M.
- My child will abide by all Arrowhead High School and College Board test security measures
- My child will make arrangements with their teachers to complete any work missed during this exam

I have enclosed the non-refundable \$18 testing fee (Checks payable to Arrowhead High School)

Parent Signature

Date

If your family receives free-reduced lunch, and you'd like to request the \$18 fee waived, please check box