

PAGE Georgia Academic Decathlon

TEST REQUEST FORM 2009-2010
(All tests will be sent in electronic format)

School District _____

Decathlon District Coordinator _____

Address: _____

City state zip

Phone () _____ () _____
Day evening

FAX: () _____ e-mail _____

Alternate e-mail _____

Projected Date for Test A: (November 9-13, 2009) _____

Projected Date for Test B: (January 11-15, 2010) _____

**If you would like your January test mailed to you during the holidays please provide your address here.
Otherwise the test will be mailed to you during the first week of January at the address you provided above.

Holiday Mailing Address: _____

Signature – PAGE GAD Test Coordinator

Date

DEADLINE – October 15th

Mail to:

Michelle Crawford

PAGE Georgia Academic Decathlon

645 Old Summerville Rd NW, Rome GA 30165

OR

FAX to: PAGE GAD 770.216.9672

The test materials will be distributed to the person you designated as your PAGE GAD Test Coordinator one week prior to the date that the test is administered.

REMINDER: Tests must be received, administered and scored by someone OTHER than the coach. At NO time is the coach to see or receive any USAD competition tests.