

A. Student Information				
		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. School Record	Gr. 6	Gr. 7	Gr. 8
Religion			
English Language Arts (ELA)			
Mathematics			
Social Studies			
Science			
Foreign Language (specify)			

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

D. Standardized Test Record				
NY State Testing	Grade 6		Grade 7*	
	Performance Level		Performance Level	
ELA Test				
Mathematics Test				

TerraNova	Grade 6	Grade 7	Grade 8
	Nat'l %ile	Nat'l %ile	Nat'l %ile
Reading Total			
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 regarding your child. Due date to each of the high schools is December 16, 2020. DO NOT RETURN TO THE TACHS EXAMINATION OR DIOCESAN OFFICES.

* Due to the cancellation of all New York State tests for the 2019–2020 school year, State test results are not available for Grade 7. When completing this record form, administrators should leave the Grade 7 information blank.