

# NNAT2 Registration Form

*Deadline: November 2, 2009*

PLEASE PRINT

## Part A: Student Information *(complete all information requested)*

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M.I. \_\_\_\_\_

Date of Birth (month/day/year): \_\_\_\_\_ Gender: *(check one)*  Male  Female

Ethnic Code: *(check all that apply)*  African American  American Indian/Alaskan  
 Asian/Pacific Islander  Caucasian, not Hispanic  Hispanic

## Part B: Parent Contact Information *(complete all information requested)*

Name: \_\_\_\_\_ Daytime Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ Evening Phone: (\_\_\_\_) \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ Alternate Phone: (\_\_\_\_) \_\_\_\_\_

Home Language: *(for reporting results)*  English (11)  Hmong (20)  Spanish (45)  
 Vietnamese (51)  Somali (69)  Other (specify) \_\_\_\_\_

## Part C: Testing Session Choices

Child's current grade:  Kindergarten  First Grade  Second Grade  
 Third Grade  Fourth Grade  Fifth Grade

*Place an "X" in the box to indicate your choice of test date and time.*

Thursday, December 3, 2009:  5:00 p.m. (Grades K-5)  
*Location: Center for Professional Development, 345 Plato Blvd., St. Paul, MN 55107*

Saturday, December 5, 2009:  9:00 a.m. (Grades K-5)  10:30 a.m. (Grades K-5)  
*Location: Center for Professional Development, 345 Plato Blvd., St. Paul, MN 55107*

**IMPORTANT: Read and sign the next form and return by Monday, November 2, 2009.**

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**Part D: NNAT2 Testing Procedure Terms**

Please read the following terms and conditions regarding the NNAT2 Testing Procedure.

- After registration materials have been received, verification will be sent to the parent/guardian with information indicating the time, date and grade level of the test for which the child has been registered.
- When checking in for testing, proof of residency in Saint Paul MUST be provided to gain entrance. This could be a driver's license or other photo ID or proof of residency (such as a recent utility bill).
- Parents will wait in a waiting area while their children are being tested. Testing will take about 45 minutes.
- Those not able to attend during a scheduled testing session should contact the Gifted Services Office at (651) 744-1303 by November 2, 2009. These students will be scheduled during another testing session ONLY if there is space available.
- All testing materials remain the property of the Saint Paul Public School District.

By signing below, I indicate that I have read and agree to the terms described above.

**Signature of Parent/Guardian:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*Please return this form by mail or FAX to:*

Attn: Ashley Cannaday  
Center for Professional Development  
Gifted Services  
345 Plato Blvd.  
St. Paul, MN 55107

Fax: 651-744-1399  
Phone: 651-744-1303

***Form must be received by Monday, November 2, 2009.***