SCHOOL RECORD OF EXAMINATIONS REQUESTED
JUNE 2021

This form may be photocopied by the school and used in the following ways:

- As a worksheet for preparing your school's online request for submission to the Department
- For circulation to the department chairpersons, special education coordinators, and other school officials for reporting their exam needs to your school's central office on a subject-by-subject basis

Be sure to retain in your files the final version of this form, which matches the online request submitted to the Department. You will need to use that version to check your confirmation notice, which will be sent by e-mail within three business days of the submission of your school's online exam request.

School Name _____ **Date** _____

REGENTS EXAMINATIONS

TITLE	Regular	Large Type	Braille
English Language Arts			