

Certification of Documentation

For Test Takers Whose Primary Language Is Not English



If paying by paper check or U.S. Postal Service money order, mail to:

ETS-Praxis

Box 382065

Pittsburgh, PA 15251-8065

If paying via credit or debit card, see the address information on page 13 of this Bulletin.

If you have previously registered and your request for accommodations has been approved by ETS, you need to submit the Eligibility Form on page 39. See "If Your Primary Language Is Not English" on page 12 for more information.

TO BE COMPLETED BY A QUALIFIED PROFESSIONAL AND SENT TO ETS WITH THE TEST TAKER'S ELIGIBILITY FORM, REGISTRATION FORM, AND TEST FEES. **DO NOT MAIL THIS FORM SEPARATELY TO ETS.** Incomplete documentation will not be processed and will be returned to you. You will have to resubmit all appropriate forms for a future test administration.

Complete and sign. Cross out material within brackets that does not apply.

1. I, _____, am [a qualified ESL teacher/coordinator, foreign language department supervisor/chairperson, or other appropriate professional (specify) _____] at _____ (Name of Institution). I have held that position since _____ (Date).
2. I have worked with and/or reviewed pertinent documentation about _____ (Print Name of Test Taker).
I certify that English is not the test taker's primary language. The test taker's primary language is _____.
3. The test taker is taking one or more *Praxis* tests to meet the requirements of _____ (Institution/State/Agency).
The score recipient code is _____.
4. In the event Educational Testing Service (ETS) requests a copy of the documentation described above, I promise to send ETS, for its consideration, any information pertinent to establishing the need for these accommodations (pursuant to the test taker's permission on the Eligibility Form) sufficiently in advance of the test administration date in question to permit complete processing.

_____ Date

_____ Name

Attach Business Card OR School Seal OR School Stamp Below

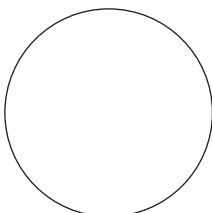
_____ Signature*

Business Card

_____ Title

_____ Institution

School Seal or School Stamp



_____ Telephone and/or TDD/TTY Number

_____ Fax Number

_____ Email

* Must be original signature. Photocopy of signature or stamped signature will not be accepted. A business card or school seal or school stamp must be affixed to this form.