



STUDENT ID FORM

This form is to be completed by students whom do not posses identification in order to provide proof of identity to complete placement testing at RCBC.

Instructions: Please complete all of the required student information, affix a photograph and provide your parent's signature.

Name of Student: _____ RCBC ID # _____
(PLEASE PRINT)

Student's Date of Birth: _____ Sex: Male Female

Student Signature: _____ Date: _____

Parent Signature: _____ Date: _____



Staff Signature: _____ Date: _____

Student: You are required to sign and date this form below on test day. Please bring this form every time you take a test.

I am the person whose signature, description, and picture appear above. I am signing this document (below) in the presence of Test Center staff on the test date(s) listed. My signature attests to the truthfulness of the statements made on this document.

Student Signature: _____ Test Date: _____

Student Signature: _____ Test Date: _____