## Administrative Only: HEA member\_\_\_\_ 2023-2024 CSRA HEA TestingApplication Days \*\*\*Deadline: February 23, 2024 • Complete all 10 sections Job 1. Please check ALL testing sessions for which you are applying: Payment: ☐ Grades 1-8 April 22-24 Cash ☐ Grades 9-12 April 22 & 23 Check/Money Order # This is my first time testing with the CSRA HEA (circle one) YES NO Amount I am a nurse or have medical training. (circle one) YES NO Postmark Received **2. Family Information** (Please PRINT clearly) Parent/Guardian Name Street Address Apt. Zip Code City State Home Ph. # Cell Ph. # Email Birthday **3. Names of Children Testing** (write names of additional children & info on back) Grade Mo/ Day /Yr 4. Names of Children Needing Child Care Age For children 0-5 who would need child care on the day(s) you are assigned to work 5. Does your child have a food or drug allergy, medical condition? (circle one) YES\*\* NO \*\* If yes, please use the back of this application to explain the allergy or medical condition for each child. **6.** Is your child enrolled in any public school program (i.e. GA Cyber Academy or other)? (circle one) YES 7. Job assignment: Mark your preference in order of 1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>nd</sup>. See the attached descriptions. If you do not indicate your 3 preferences, we will choose your job for you. One parent from each family must be willing to help on one testing day. The work schedule will be sent out in an email prior to the testing dates. You are responsible to check for your assignments & be there on your assigned days to fulfill your job as indicated under the job description or your family's tests will not be scored. If you need to change your jobs or have another CSRA HEA member take your place, please contact Brenda or Stacy (csrahea.testing@gmail.com) & make us aware of the change. Wherever needed Playground supervision Set-up (this will take an hour or less) Child care for workers' children

8. The Cost: \$25 per child or the maximum is \$75 for a single family. Please make checks payable to CSRA HEA.

Teacher (must be available for 3 or 2 days): please fill out Teacher Application INSTEAD

\_\_\_\_\_ Clean-up (after testing on Thursday- -about 1 hr)

Available entire week

**9.** <u>Your signature</u> below attests that you have read all **four pages** of this testing application and you understand and will fulfill your job as related in the description on the second page of this application.

Signature Date

Men especially needed

Teacher's helper

\*Registration fees are non-refundable except in the case of an emergency.

10. Complete online or Mail application to:

Brenda Duke 831 Cove Springs Dr. Martinez, GA 30907