

UEB Recertification Application



Washington State School for the Blind
Ogden Resource Center
2310 East 13th Street
Vancouver, WA 98661
360-947-3344 or braille@wssb.wa.gov

Applicant Information

Name

Home Address

City State Zip Code

Home Telephone Email

Additional Telephone I need special accommodations:

I need the test in: (example: reader)

Applicant Signature Date

Test Proctor Information

The examination will be mailed to the proctor listed below who will make arrangements to have it proctored and returned for scoring. Please allow 2-4 weeks for your results.

Proctor Name

Work Address

City State Zip Code

Work Telephone Email

What you need: Braille Writer, 11-1/2 x 11 Braille Paper, Reference Materials, Braille Eraser

Mail this completed form along with your \$50 payment (checks made out to the ORC) to:

Ogden Resource Center
Braille Examination
2214 East 13th Street
Vancouver, WA 98661