



Washington State Unified English Braille Competency Exam

Washington State School for the Blind
Ogden Resource Center
2310 E. 13th St.
Vancouver, WA 98661

Applicant Information

May we add your name to our Vision Professional Directory? Yes No

Name _____

Home Address _____

City _____ State _____ Zip _____

Home Telephone _____ E-mail _____

Applicant Signature: _____ **Date** _____

Primary School District/Agency _____

Other Districts/Agencies _____

Your hire date: _____

Primary Role: TVI Parapro Other _____

Primary Work Address: _____

City _____ State _____ Zip _____

E-mail _____

Work phone _____ Ext. _____

FAX _____

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.

Proctor Name _____

Address _____

City _____ State _____ Zip _____

Phone Number _____ Ext. _____

E-mail _____

