

Student ID (or random number given by teacher): _____

Birthdate (MM/DD/19YY): _____

Today's Date: _____

Race: _____

Please circle one for each of the following:

Teacher: _____

Gender:	Male		Female				
Year in School:	6	7	8	9	10	11	12
	13	14	15	16			

- 1 a b c
- 2 a b c d e
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- 19 a b c
- 20 a b c d e
- 21 a b c d e
- 22 a b c d
- 23 a b c
- 24 a b c