APPENDIX K-2

TEST SITE LIST (TSL)

(Test centers should have received copies of this scannable TSL form in their test delivery shipment)

County/Region Name:	County/Region Number:
Test Site Name:	3 Digit Test Site Number:

Contact Person: _____ Phone: (_____)_____ E-Mail _____

Information on this form must match that provided on the Group Information Sheet (GIS), including examiner name, and number of examinees tested. The TASC™ Coordinator/Examiner must mail the completed Test Site List (TSL) to CTB McGraw-Hill in Indianapolis, Indiana as part of the completed test materials packet.

Field for Internal Use	Examiner Name (Must Match GIS Sheet)	Number of Examinees Tested	Comments