## Request Form: Alternative Testing Date for Sabbatarians

Please *fill in all fields* before submitting to the Religious Liberty Department.

First Name				Gender:	Male	Female
Middle Initia	1					
Last Name						
Address						
City				State	Zip	
Daytime Telephone No.						
Email						
Name of Church						
	Carol	lina ☐ Ga-Cumberla	and ∏Florida	☐Gulf States	∏Kent	ucky-Tennessee
Conference		_	_	_	_	·
(check one)		South Atlantic South Central Southeastern				
Pastor's Name						
Testing Agency (check one)		□SAT □ACT	Praxis (Specify:			)
Agency Address						
Scheduled AND Alternative Test Date (Please include BOTH):						

We are happy to do a letter for test takers. Please ensure that all the fields are filled in before you submit your request. Letters can usually be done in a day or two, however, mailing time usually adds 3-5 days for receipt. Remember you are responsible for submitting the letter with your test application.

For questions or additional help contact us at:

ReligiousLiberty@southernunion.com