	1st Time	2nc	I Time	Final Time
Name: _		_ Da	te:/	
SS#	/	De	partment:	
Subject:_		FIF	P#(	Contract #
Ending date of class if re-take://				
	When responding to TRUE/FALSE questions, use choice "A" to indicate TRUE and choice "B" to indicate FALSE.			
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20	A B C D E F A B C D E F	21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40	A B B B B B B B B B B B B B B B B B B B	