



Cued American English Competency Screening-Expressive (CAECS-E) Candidate Application

Test Candidate Information

First Name _____
Last Name

Mailing Address

City _____
State _____
Zip code

Home phone _____
Work/Cell phone

E-mail

SECTION 1: CAECS-E TESTING HISTORY

Have you ever taken the CAECS-E before? YES _____ NO _____ (If no, skip to Section 2)

Which form(s) of the CAECS-E have you taken? FORM A _____ FORM B _____ FORM C _____ FORM D _____

When did you most recently take the CAECS-E? _____
Month _____
Year (Note: The CAECS-E may not be retaken within six months.)

SECTION 2: CAECS-E PROCTORING HISTORY

Have you ever proctored the CAECS-E for anyone else? YES _____ NO _____ (If no, skip to next section)

Which form(s) of the CAECS-E have you proctored? FORM A _____ FORM B _____ FORM C _____ FORM D _____

List the names of all test candidate(s) for whom you proctored the CAECS-E: _____

Test Proctor Information

Who have you designated to be your proctor for the CAECS-E? This individual may not be a relative nor live in the same household. Proctors of the CAECS-E forego the ability to take certain forms of the test. You may wish to select a non-cuer.

First Name _____
Last Name

Home phone _____
Work/Cell phone

E-mail (Instructions and link will be sent to this email address.)

I have sent the \$80 non-refundable testing fee as a check by mail. _____ I have paid the \$80 through tecunit.org. _____

I attest that the above information is complete and accurate.

Signature _____
Date

Checks should be made payable to: TECUnit, Inc. | 3057 Nutley Street, Suite 571, Fairfax, VA 22031 | 703.239.3433 (v/txt)