Request for SB10 Georgia Special Needs Scholarship Student to Participate in State Assessments

Student Name (Last, First, MI)			Student Date of Birth	
Student's GTID*		Student's Grade	Student's School	
School Contact			School Phone Number	
Parent/Guardian Email Address			Parent/Guardian Phone Number	
Parent/Guardian Street Address			Parent/Guardian City, State, Zip	
Reques	sted Assessment(s): (che	ck one)		
	Assessn	nent	Administration Date(s)	Registration Must be Received by:
	Georgia Alternate Asses	ssment (GAA 2.0)	March 23 – May 1, 2026	January 26, 2026
	Georgia Milestones End-of-Grade (EOG)		April 6 – May 15, 2026	February 9, 2026
	Georgia Milestones End-of-Course (EOC)		April 13 – May 22, 2026	February 16, 2026
	Algebra: Concepts and Connections		April 13 – May 22, 2026	February 16, 2026
	Biology		April 13 – May 22, 2026	February 16, 2026
	Literature & Composition II		April 13 – May 22, 2026	February 16, 2026
	United States Histor	-у	April 13 – May 22, 2026	February 16, 2026
Will the	e student require assessr No	ment accommodation	cumentation verifying eligibilins as indicated in the text on too of requested accommodation	he previous page?
Forms	must be submitted to the	e student's resident s	school system.	

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* For assistance with obtaining your student's Georgia Testing Identifier (GTID) or for inquiries regarding

the Georgia Special Needs Scholarship (GSNS), please contact the GSNS program staff directly.