

Request for Supplemental Shipment
Provincial Achievement Tests: May/June 2019

School Name, Contact Person and Delivery Address (for Courier)

School Code: _____
 Authority Code: _____
 School Phone: _____
 School Fax: _____

The following Provincial Achievement Tests are required:

English Provincial Achievement Tests		
Course	Part	# Required
ELA 6	A <input type="checkbox"/> B <input type="checkbox"/>	
Mathematics 6	A <input type="checkbox"/> B <input type="checkbox"/>	
Science 6		
Social Studies 6		
ELA 9	A <input type="checkbox"/> B <input type="checkbox"/>	
Mathematics 9	A <input type="checkbox"/> B <input type="checkbox"/>	
Science 9		
Social Studies 9		
K&E ELA 9	A <input type="checkbox"/> B <input type="checkbox"/>	
K&E Mathematics 9		
K&E Science 9		
K&E Social Studies 9		

French Provincial Achievement Tests		
Course	Partie	# Required
FLA 6	A <input type="checkbox"/> B <input type="checkbox"/>	
Français 6	A <input type="checkbox"/> B <input type="checkbox"/>	
Mathématiques 6	A <input type="checkbox"/> B <input type="checkbox"/>	
Sciences 6		
Études sociales 6		
FLA 9	A <input type="checkbox"/> B <input type="checkbox"/>	
Français 9	A <input type="checkbox"/> B <input type="checkbox"/>	
Mathématiques 9	A <input type="checkbox"/> B <input type="checkbox"/>	
Sciences 9		
Études sociales 9		
K&E Mathématiques 9		
K&E Sciences 9		
K&E Études sociales 9		

Notes/Special Requests:

Email this form to: exam.admin@gov.ab.ca using the subject line: **PAT Supplemental Shipment - your school name and school code** (e.g. PAT Supplemental Shipment – Ben Hur School, 9999)