

UEB Recertification Application



Washington State school for the Blind

Ogden Resource Center

2310 East 13th Street

Vancouver, WA 98661

360-947-3344 or braille@wssb.wa.gov

Applicant Information

Name

Home Address

City

State

Zip Code

Home Telephone

Email

Additional Telephone

I need special
accommodations:
(example: reader)

I need the test in:

Applicant Signature

Date

Test Proctor Information

The examination will be mailed to the proctor listed below who will make arrangements to have it proctored and returned for scoring. Please allow 2-4 weeks for your results.

Proctor Name

Work Address

City

State

Zip Code

Work Telephone

Email

What you need: Braille Writer, 11-1/2 x 11 Braille Paper, Reference Materials, Braille Eraser

Mail this completed form along with your \$50 payment (checks made out to the ORC) to:

Ogden Resource Center

Braille Examination

2214 East 13th Street

Vancouver, WA 98661