

(PLEASE COMPLETE. IF YOU DO NOT HAVE A COLLEGEBOARD ACCOUNT, PLEASE ESTABLISH ONE AND FILL IN BELOW.)

COLLEGEBOARD USER NAME: _____
COLLEGEBOARD PASSWORD: _____

EDUCATIONAL CONSULTANT & TUTOR
MARY WHARTON SCHROEDER



SAT/ACT Exam Prep
Phone: 813.340.4231

Dear Student,

Welcome! This form is strictly for my records. The information will help me to best assist you. Please try to complete and return it by our next session. Thank you for this opportunity to help you to improve your SAT and/or ACT score. I am looking forward to working with you!

Mary Wharton Schroeder

STUDENT INFORMATION

Name: _____ Today's Date: _____
Present School: _____ Age _____ Grade in School: _____ Who referred you to me? _____
Your Mailing Address (Street, City, State, ZIP): _____

E-mail Address: _____ Zoom Address: _____
Phone(s): (Cell) _____

PARENTAL INFORMATION

Name(s): _____
Mailing Address: _____
E-mail Address: _____
Phone(s): _____
Parents' Occupations: _____

SCORES *PRIOR TO TUTORING*:

Have you taken the *PSAT* while in high school? Yes No The *SAT*? Yes No

Most recent *PSAT* score
1. Cr Reading/Writing _____ Math _____ Yr of Test _____ Grade in School when test taken: _____

SAT score (if have taken)
1. Cr Reading/Writing _____ Math _____ Yr of Test _____ Grade in School when test taken: _____

2. Cr Reading/Writing _____ Math _____ Yr of Test _____ Grade in School when test taken: _____

SAT Testing Date after tutoring with Mrs. Schroeder will be: (Month/Year) _____ / _____

ACT or *PLAN* (if have taken)
1. Grammar _____ Math _____ Rding _____ Science _____ Total Score _____ Grade when test taken: _____
▪ If you have not taken the *ACT*, do you plan to do so? _____ If so, when? (Month/Year) _____

PLEASE INDICATE ANY SPECIAL SITUATIONS WHICH MAY HELP ME TO ASSIST (HEALTH, HAVE EXTENDED TIME, ETC.)
