

Indiana Certificate for Praxis® Re-test

Submit this certificate to ETS so that an eligible test taker may re-take a *Praxis* Subject Assessment free of charge. Upon approval by ETS, the test taker will be provided with a voucher code to be used for registration on the ETS website. Any additional service fees will be the responsibility of the test taker.

*Required Fields

| Praxis Candidate ID Number | |
|--|-----------------------------------|
| *Test Taker's Name | |
| *Date of Birth | |
| *Test Taker's GPA | |
| *Test Taker's Email Address | |
| * <i>Praxis</i> Test Code/Test Name <select></select> | |
| *Name of Institution | |
| Student meets all eligibility requirements | |
| Student does not meet all eligibility requirements | Please Note Exception Here: |
| *Name of Dean or Program Director Granting Approval | |
| *Dean or Program Director Email Address | |
| *Issue Date | |

*Certificate is valid for one year from the issue date.

This form must be completed by an authorized individual at your institution. Email this completed form to ETS at PraxisFeeWaiver@ets.org.

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