



COMPLETE MARK ● EXAMPLES OF INCOMPLETE MARKS



You must use a No. 2 pencil and marks must be complete. Do not use a mechanical pencil. It is very important that you fill in the entire circle darkly and completely. If you change your response, erase as completely as possible. Incomplete marks or erasures may affect your score.

1 Your Name: _____
(Print)

[Last](#)

First

M.J.

I agree to the conditions on the front and back of the SAT[®] test booklet. I also agree with the SAT Test Security and Fairness policies and understand that any violation of these policies will result in score cancellation and may result in reporting of certain violations to law enforcement.

Signature: _____ Today's Date: ____/____/____

Today's Date: / /
MM DD YY

Home Address: _____
 (Print) Number and Street City State/Country Zip Code

Phone: () _____ Test Center: _____
(Print) City State/Country

2		YOUR NAME									
Last Name (First 6 Letters)						First Name (First 4 Letters)				M.I.	
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A	A	A	A	A	A	A	A	A	A	A	A
B	B	B	B	B	B	B	B	B	B	B	B
C	C	C	C	C	C	C	C	C	C	C	C
D	D	D	D	D	D	D	D	D	D	D	D
E	E	E	E	E	E	E	E	E	E	E	E
F	F	F	F	F	F	F	F	F	F	F	F
G	G	G	G	G	G	G	G	G	G	G	G
H	H	H	H	H	H	H	H	H	H	H	H
I	I	I	I	I	I	I	I	I	I	I	I
J	J	J	J	J	J	J	J	J	J	J	J
K	K	K	K	K	K	K	K	K	K	K	K
L	L	L	L	L	L	L	L	L	L	L	L
M	M	M	M	M	M	M	M	M	M	M	M
N	N	N	N	N	N	N	N	N	N	N	N
O	O	O	O	O	O	O	O	O	O	O	O
P	P	P	P	P	P	P	P	P	P	P	P
Q	Q	Q	Q	Q	Q	Q	Q	Q	Q	Q	Q
R	R	R	R	R	R	R	R	R	R	R	R
S	S	S	S	S	S	S	S	S	S	S	S
T	T	T	T	T	T	T	T	T	T	T	T
U	U	U	U	U	U	U	U	U	U	U	U
V	V	V	V	V	V	V	V	V	V	V	V
W	W	W	W	W	W	W	W	W	W	W	W
X	X	X	X	X	X	X	X	X	X	X	X
Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Z	Z	Z	Z	Z	Z	Z	Z	Z	Z	Z	Z

3		DATE OF BIRTH			
MONTH	DAY	YEAR			
☐ Jan					
☐ Feb	0	0	0	0	
☐ Mar	1	1	1	1	
☐ Apr	2	2	2	2	
☐ May	3	3	3	3	
☐ Jun	4	4	4	4	
☐ Jul	5	5	5	5	
☐ Aug	6	6	6	6	
☐ Sep	7	7	7	7	
☐ Oct	8	8	8	8	
☐ Nov	9	9	9	9	
☐ Dec					

[illegible]

Important: Fill in items 8 and 9 exactly as shown on the back of test book.

9	TEST ID (Copy from back of test book.)					

8	FORM CODE			
(Copy and grid as on back of test book.)				
A	A	A	A	0
E	E	E	E	1
C	C	C	C	2
D	D	D	D	3
E	E	E	E	4
F	F	F	F	5
G	G	G	G	6
H	H	H	H	7
I	I	I	I	8
J	J	J	J	9
K	K	K	K	
L	L	L	L	
M	M	M	M	
N	N	N	N	
O	O	O	O	
P	P	P	P	
Q	Q	Q	Q	
R	R	R	R	
S	S	S	S	
T	T	T	T	
U	U	U	U	
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W	W	W	W	
X	X	X	X	
Y	Y	Y	Y	
Z	Z	Z	Z	

5			ZIP CODE		
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6		TEST CENTER	
(Supported by Test Center Supervisor.)			
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7		TEST BOOK SERIAL NUMBER	
(Copy from front of test book.)			
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FOR OFFICIAL USE ONLY						
0	1	2	3	4	5	6
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PLEASE DO NOT WRITE IN THIS AREA

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SERIAL #

SECTION

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- A B C D
- 3
- A B C D
- 4
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SAMPLE

SECTION

1



COMPLETE MARK

EXAMPLES OF INCOMPLETE MARKS

You must use a No. 2 pencil and marks must be complete. Do not use a mechanical pencil. It is very important that you fill in the entire circle darkly and completely. If you change your response, erase as completely as possible. Incomplete marks or erasures may affect your score.

SECTION 2

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Quality Assurance Mark

SAMPLE

SECTION

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SECTION

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- ☐ I understand that my essay (without my name) may be reproduced in other College Board materials. If I mark this circle, I withhold my permission to reproduce my essay for any purposes beyond score reporting and the assessment of my writing skills. Marking this circle will have no effect on my score, nor will it prevent my essay from being made available to any college to which I send my SAT scores.

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Words written outside the essay box or written in ink **WILL NOT APPEAR** in the copy sent to be scored, and your score will be affected.

PLANNING PAGE You may plan your essay in the unlined planning space below, but use only the lined pages following this one to write your essay. Any work on this planning page will not be scored.

Use pages 7 through 10 for your ESSAY →

FOR
SAMPLE
PLANNING
ONLY

Use pages 7 through 10 for your ESSAY →

SAMPLE

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SAMPLE

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this page will
not be scored.



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