3A Learning Management System

Registration Form

TESTING CENTRE REQUIREMENTS:

* High speed internet
* Computers with web camera, microphone and
* headphones (mobile ear-buds OK)
* Latest version of Google Chrome installed
* Privacy dividers
* Proctor to facilitate the exam and check IDs
* Maximum 50 students per exam at one time

Please fill out the form to sign up your school. Please email this completed for to contact@3aenglish.com. We will contact you with an invoice within two business days.

Please complete the steps below so we can create appropriate user accounts.

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| **STEP 1** |  |
| **School Information**This is the school’s primary contact information. |
| SCHOOL NAME |
| SCHOOL ADDRESS (Mailing) |
| EMAIL | PHONE |

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| **STEP 2** |  |
| **School Administrator**This section is for the school administrator. They will be the primary contact with 3Aenglish. They will have a control account on 3Aenglish.com where they can monitor teachers, students, and receive communication and billing information from us. |
| FIRST NAME | LAST NAME |
| EMAIL | PHONE |
| WEBSITE USERNAME |  |

Teachers will receive an email with a registration link to send to their students.

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| **STEP 3** |  |
| **Teacher classroom information**Add a teacher and their classes. |
| FIRST NAME | LAST NAME |
| EMAIL | PHONE |
| WEBSITE USERNAME |  |
| **Classes** |
| CLASS 1 NAME | NUMBER OF STUDENTS |  |
| CLASS 2 NAME | NUMBER OF STUDENTS |  |
| CLASS 3 NAME | NUMBER OF STUDENTS |  |
|  | TOTAL STUDENTS |  |

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| **Teacher classroom information** |
| FIRST NAME | LAST NAME |
| EMAIL | PHONE |
| WEBSITE USERNAME |  |
| **Classes** |
| CLASS 1 NAME | NUMBER OF STUDENTS |  |
| CLASS 2 NAME | NUMBER OF STUDENTS |  |
| CLASS 3 NAME | NUMBER OF STUDENTS |  |
|  | TOTAL STUDENTS |  |

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| **Teacher classroom information** |
| FIRST NAME | LAST NAME |
| EMAIL | PHONE |
| WEBSITE USERNAME |  |
| **Classes** |
| CLASS 1 NAME | NUMBER OF STUDENTS |  |
| CLASS 2 NAME | NUMBER OF STUDENTS |  |
| CLASS 3 NAME | NUMBER OF STUDENTS |  |
|  | **TOTAL STUDENTS** |  |

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| **Teacher classroom information** |
| FIRST NAME | LAST NAME |
| EMAIL | PHONE |
| WEBSITE USERNAME |  |
| **Classes** |
| CLASS 1 NAME | NUMBER OF STUDENTS |  |
| CLASS 2 NAME | NUMBER OF STUDENTS |  |
| CLASS 3 NAME | NUMBER OF STUDENTS |  |
|  | **TOTAL STUDENTS** |  |

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| **TOTAL STUDENTS FOR ALL CLASSES** |  |

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| **STEP 4** |  |
| **FINAL EXAM INFORMATION**Please select dates and times for your exams, or email contact@3aenglish.com to schedule a phone call.Not sure on your test dates? You can register for the final exam later. Please allow MINIMUM TWO WEEKS NOTICE when registering for your exams. |
| **PROCTOR INFORMATION** |
| **NAME:** |
| **EMAIL:** |
| **PHONE:** |
| **CLASS NAME** | **LOCATION** | **DATE / TIME (3 hour blocks)** |
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