

**THE COMPREHENSIVE EXAMINATION IN MODERN GREEK**  
**Monday, June 20, 2016 - 1:15 - 4:15 p.m.**

**REGISTRATION FORM FOR INDEPENDENT STUDENTS**

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

TEL. (    ) \_\_\_\_\_

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**I WOULD LIKE THE *FINAL GRADE CERTIFICATE* TO BE MAILED TO:**

*(Please check one)*

\_\_\_\_\_ My home address as stated above.

\_\_\_\_\_ My school address as indicated below.  
*(Please provide the name of principal or guidance counselor.)*

Principal/Counselor \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Please mail, by **May 20, 2016**, the enclosed *Registration Form* and *Statement of Intent* to:

**Direct Archdiocesan District Office of Education**  
Greek Orthodox Archdiocese of America  
Attention: Mrs. Maria Makedon, Director  
8 East 79<sup>th</sup> Street  
New York, NY 10075-0106