

ACCUPLACER REGISTRATION FORM

PLEASE PRINT NEATLY

I have never attended college and taken English or Math courses _____
Please Initial

L NUMBER:	<input type="checkbox"/> NO BANNER RECORD	SS#	
LAST NAME:			
FIRST NAME:			
ADDRESS:			
CITY:	STATE:	ZIP:	
TELEPHONE:	MAJOR:		
FOR OFFICIAL USE ONLY: TESTING FEES			
FULL TESTING	<input type="checkbox"/> \$30	RETESTING:	
Approved by: _____	<input type="checkbox"/> \$10 MATH	<input type="checkbox"/> \$10 ENGLISH	<input type="checkbox"/> \$10 READING
Accuplacer Testing Policy:			
<ul style="list-style-type: none">• Anyone wanting to assure an Accuplacer Placement test date may pre-register for a specific test date in the Office of Student Affairs.• There will be a non-refundable \$30 testing fee (to be paid by cash or money order in Administration). This fee is due upon pre-registration with a specified test date.• TEST TAKERS MUST ARRIVE NO LATER THAN 20 MINUTES PRIOR TO TEST TIME IN ORDER TO ASSURE CHECK-IN AND RESERVATION.• Once checked in, test takers must remain in the waiting area to receive further instruction from the Testing Coordinator.• A photo ID is required at the time of testing in order to enter the testing area.• The \$30 testing fee is NOT transferrable to another testing date unless you call (985) 448-7942 prior to testing to reschedule.			
Retesting Policy:			
<ul style="list-style-type: none">• You will only be allowed to test a total of 3 times.• You may not retest for a minimum of 14 days after your initial testing.			
By signing below you acknowledge that you have read and agree to the above polices:			
Signature _____			
Date _____	Date of Testing _____		
FOR BUSINESS OFFICE ONLY:			
Payment received by: _____ Date: _____			
Receipt Number: _____			