

**Test Registration Form**  
**Savannah State University**  
Testing Center, P. O. Box 40284 (912) 358.4487

Test Date: \_\_\_\_\_ Test Time: \_\_\_\_\_

\_\_\_\_\_  
Last Name First Name MI

\_\_\_\_\_  
Street Address City State Zip Code

\_\_\_\_\_  
Title of Examination you wish to take (indicate if essay is needed)

\_\_\_\_\_  
Name, City, and State of your Home College or University (where you want your scores sent)

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Student or SSU ID

\_\_\_\_\_  
(Area code) Home Telephone

\_\_\_\_\_  
(Area code) Cell or Work Telephone

\_\_\_\_\_  
E-mail address

**Place an "X" in the box to indicate the test in which you are interested:**

☐ COMPASS (\$30.00) ☐ COMPASS EXIT Retest (\$10.00- LS Students Only) ☐ C LEP (\$15.00) ☐ DANTES (\$15.00)  
(includes COMPASS Retest)

☐ Independent Exam/Distance Learning \$ \_\_\_\_\_ total proctoring fee = \_\_\_\_ hrs. (Maximum testing time allowed) X \$20.00

**Place an "X" in the box to indicate how you will pay (All payments using money order, check or cash MUST be paid in the SSU Cashier's Office in Hill Hall between the hours of 8:30am and 4:00pm, Monday through Friday):**

☐ Credit Card (online payment only) ☐ Money Order ☐ Check ☐ Cash

**Please note the following conditions:**

- Please print a "completed copy" of this form and print a copy of your confirmation number and/or receipt and bring it with you on test day.
- All test fees are non-refundable and must be received prior to test session. . Students who wish to postpone their exams must register and pay again.
- At test time, you must present a current, government-issued picture ID such as a Georgia Driver's License plus one other ID with picture &/or signature.
- If you have a documented disability, contact the test administrator to make necessary arrangements at least two weeks prior to your test date.
- Please see SSU Testing website for details about receipt of test scores.
- CLEP Test requires a six-month waiting period before you can retake the same exam.
- Fees for *Independent/Distance Learning* tests will be assessed for payment based on time allotted for test. For example: If the maximum time on your test has been designated as two (2) hours by your home institution or agency, you will be assessed a fee of \$40.00.
- COMPASS Retest must be authorized by home institution, if other than Savannah State University.

*I accept the above conditions and understand that I will receive college credit/or test as stated by my home school if I meet or exceed the required score.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**SSU Testing website for more information:**

[www.savannahstate.edu/testing](http://www.savannahstate.edu/testing)

**Important Note:**

To obtain this document in an alternative format and to request accommodations, please contact:  
Counseling and Disability Services, (915) 358-3115, [moorea@svannahstate.edu](mailto:moorea@svannahstate.edu)

**--STAFF USE ONLY--**  
**Account Detail: M124**

\_\_\_\_\_  
Date received

\_\_\_\_\_  
Amount

\_\_\_\_\_  
Staff signature

\_\_\_\_\_  
Receipt number