

## TEST REGISTRATION FORM

COMPLETE THIS FORM and either **MAIL** (see address below), **FAX** to 586.498-4101 or **CALL** 586.498.4130 to register. The cost is **\$50.00** each time you test; payment must be received prior to testing. Early registration is recommended to ensure an available seat. Please arrive 10 minutes prior to scheduled test time. **Bring valid picture I.D. such as a driver's license. NO CELL PHONES ADMITTED INTO TEST ROOM - CANCELLATIONS must be made 24 HOURS PRIOR TO SCHEDULED TEST DATE**

**Location: Macomb Community College – MTEC, 7900 Tank Ave, Warren, MI 48092,  
Workforce Assessment Center Room 126**

### PLEASE INDICATE PROGRAM

- Certified Nursing Assistant (Reading, Mathematics, Locating)*
- Controls Robotics Technician (CRT) (Reading, Mathematics, Locating)*
- National Career Readiness Certificate (Reading, Mathematics, Locating)*
- Multi – Skilled (Reading, Mathematics, Locating)*
- Pharmacy Technician (Reading, Mathematics, Locating)*
- POC Production Operator Certification (Reading, Mathematics, Locating)*
- CNC (Reading, Mathematics, Locating)*
- UG Designers (Reading, Mathematics, Locating)*
- Welding (Reading, Mathematics, Locating)*
- Paraprofessionals (Reading, Mathematics, Writing)*
- Plumbers & Pipefitters (Reading, Mathematics, Locating)*
- Bricklayers*

### TEST START TIMES

- 9:30am ~ R, M, LI
- Retests: 1:00pm
- 8:30am Paraprofessionals

### PLEASE INDICATE DATE

- Nov. 19, 2014 WED
- Dec. 17, 2014 – WED
- Jan. 14, 2015 – WED
- Feb. 11, 2015 - WED
- March 11, 2015 – WED
- April 8, 2015 – WED

### PERSONAL IDENTIFICATION INFORMATION

Name: \_\_\_\_\_ Date of birth: \_\_\_\_\_  
Address: \_\_\_\_\_ City & County: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_ Last 4 digits of SS# : \_\_\_\_\_

### PAYMENT REQUIRED AT TIME OF REGISTRATION

Please check the appropriate payment option:

- Michigan Works Voucher** – Office:  Clinton Twp.  Mt. Clemens  Roseville  Warren  Chrysler TTC
- Cash/Check - mail check & registration form to: **Macomb Community College – MTEC, 7900 Tank Ave, Warren, MI 48092**
- Credit card - please provide the following information below:

### CREDIT CARD INFORMATION

Please charge the following credit card (circle one): Visa, Master Card, or Discover	
Examinee Name / Card Holder Name:	
Credit Card #	
Exp. Date:	Billing Zip Code:
Three Digit Security Code Found on Back of Card:	<b>TOTAL \$50.00</b>