

First Name:

Test Center Registration Form

This form is used for cash, check, and credit/debit card payments. Credit Card payments can also be made online at https://minotstate-ndus.nbsstore.net/academic-testing-center

Please complete the top section of this form and make payment at the MSU Business Office (2nd floor of the Administration Building). **This form and a receipt must be returned to the Academic Testing Center before you are able to take an exam**.

Last Name:

Middle Initial:

Mailing Address/PO Box:			
City:			
Date of Birth:/	_/		
Email Address:			
Phone:			
TEST			TOTAL
Accuplacer Test	COST PER First Exam: \$20	11-51	IOIAL
Accupiacei lest	Additional Exams:	\$10	
TEST CLEP Test	COST PER	TEST	TOTAL
CLEP Test	\$20		
TEST	COST PER	TEST	TOTAL
DSST Test	\$20		
TEST	COST PER	TEST	TOTAL
Proctoring	\$20/Exam		
*The proctoring fee is waived for MS	SU classes and DCB classes		
Business Office Use Only			
Payment should be deposited in fund	d 20530-462100-2605.		
Payment Type: Cash Check	Credit/Debit	Total Funds De _l	posited: \$
Date of Payment		Deposit Completed by:	
Receipt Number:			