

Business Office Use Only:

Date Rec. _____

Amount Rec. _____

Receipt # _____

Initials _____



PLEASE PRINT

NAME: _____ DATE OF BIRTH: _____
(FIRST NAME) (INITIAL) (LAST NAME)

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE (8:00 AM TO 4:30 PM): _____ SOCIAL SECURITY #: ____-____-_____

COLUMBIA COUNTY RESIDENT? YES NO

HAVE YOU TAKEN THE MAT BEFORE? YES NO

IF YES, WHEN? MONTH _____ YEAR _____

(If the date was 12 or fewer months ago, give the code numbers on the lower right portion of the Admission Ticket you received from the Psychological Corporation ____-____-____-____)

NOTE: If you are repeating the MAT, you must bring your Retest Admission Ticket to the re-testing session to be admitted.

2009 – 2010 Test Dates – MILLER ANALOGIES

<u>Fall</u>	<u>Spring</u>	<u>Summer</u>
September 3, 10, 17	January 7, 14, 21, 28	June 10, 17, 24
October 1, 8, 15, 22, 29	February 4, 11, 18, 25	July 1, 8, 15, 22, 29
November 5, 12, 19	March 4, 25	August 5, 12, 19
December 3, 10, 17	April 1, 8, 15, 22, 29	
	May 6, 13, 20, 27	

Choice of test date: First choice: _____ Second choice: _____

Preferred test time: (circle one) 9:00 AM 10:30 AM

Exams are scheduled monthly. To request an individual appointment, please contact Ms. Kollar Valovage at 570-389-4112 directly.

TEST FEE: **\$80.00** (Includes score reports sent to a total of up to three institutions of your choice.)

THE TEST FEE CANNOT BE REFUNDED IF YOU ARE ABSENT FOR THE EXAM.

There is a \$10.00 administrative fee to postpone your test date.

PAYMENT:

Please complete and submit this form along with a \$80 check made payable to "Bloomsburg University" to: Business Office, Attn. Ms. Georgia Ortman, Waller Administration Building, 400 East Second Street, Bloomsburg, PA 17815

Leave this form and your check with the Business Office personnel.
A confirmation will be mailed to you after University Testing has assigned a testing date.