DANTES Registration Information

To register for any DANTES examination, please complete and return this form to the Registrar’s Office. The total cost of each test is $135. You may pay by either credit card or money order. For the test fee of $80 bring your money order (make payable to DSST) or credit card on the day of the test. A check must be written in the amount of $55 (non-refundable administrator’s fee) made payable to MCU. These amounts are per test. The deadline to register is two weeks prior to the test date. For the next available testing date or if you have any questions, please contact the Registrar at (270) 247-8521, ext. 228. Study information is available at www.peterson.com or www.getcollegecredit.com. You may access the college catalog at www.midcontinent.edu and find which tests fall under each discipline.

DATE OF TEST: __________________________  
TEST TIME: ________________________________  
TEST NAME: ________________________________  

You must complete a separate form for each test to be taken. Testing times can be arranged by contacting the Registrar’s office.

Name ___________________________________  Birth date __________________________

Address ________________________________________________________________  
Street          City          State          Zip

Home Phone __________  Work Phone __________  Cell Phone __________  

SS# __________________________  Email __________________________

*The following information must be completed in order to be registered for a CLEP test. If method of payment is not included, testing will not be permitted.

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<thead>
<tr>
<th>Method of Payment</th>
<th>Check</th>
<th>Credit Card</th>
<th>Check # __________</th>
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<table>
<thead>
<tr>
<th>Credit Card Payment</th>
<th>Visa</th>
<th>MasterCard</th>
<th>Exp. Date __________</th>
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Student’s Signature ________________________________________________________________  
(Must be signed by student)

*Academic Advisor’s Signature (Recommended) __________________________________________  
*Dean and/or Department Director’s Signature (Recommended) ____________________________

*Note: The student is responsible for taking the correct exam for his or her degree plan.