



Accuplacer Remote Testing Request Form

To be used by EGSC students who live outside of the Swainsboro area to test remotely at another institution.

Fax completed form to (478) 289-2353 or email to documents@ega.edu

Please allow up to 72 hours for an email with your unique voucher code.

Student Information:	Today's Date _____
Date of Birth _____	Student ID # _____
Name _____	
Address _____	
City _____	State _____ Zip Code _____
Phone# _____	Cell# _____
Email address _____	

Remote Site Information:
<i>If there is no institution indicated below OR if you select an institution not in the network, we will select a site closest to your physical location listed above.</i>
Institution Name _____
City _____ State _____ Zip Code _____

Please note: You will receive an e-mail directly from ACCUPLACER (NoReply@accuplacer.info) with your voucher number and instructions for contacting your selected test center for an appointment. The following information will be included in the e-mail:

- a. Your voucher number
- b. Instructions and contact information for making your testing appointment. You are responsible for contacting the center and making your own appointment.
- c. Fee information (in most cases there will be a charge for testing)
- d. Testing instructions

IMPORTANT: Print the e-mail to take with you to your appointment.

I understand **all** required information above has been provided in order to process this request. I also understand that I am solely responsible for any proctoring fees incurred as stipulated by the Remote Testing Site.

Furthermore, it is my responsibility to ensure that I complete the ACCUPLACER remote test within **90** days – otherwise I will be required to request a new voucher code as my previous code will be invalid.

Student Signature: _____ Date: _____

Date Received: _____	Date Completed: _____	Staff Initials: _____
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