

Testing Center-Kilgore Campus 1100 Broadway Kilgore, TX 75662 Phone: 903.983.8215 email:testing@kilgore.edu

## PAPER & PENCIL EXAM

**YOU MUST TAKE THE ACCUPLACER EXAM IF YOU ARE SEEKING FINANCIAL AID AND DO NOT POSSESS A HIGH SCHOOL DIPLOMA OR GED**

### Registration Procedures:

- Pay the \$59.00 testing fee in the Cashier's Office located on the 1<sup>st</sup> floor of the Devall Student Center (no personal checks)
- Submit a completed Quick THEA registration form in person or by fax and your cashier's receipt to the Testing Center by the posted deadline
- **When faxing this form, you must first pay your fee in the Cashier's Office by calling (903)983-8108. Then fax this form with your receipt number on it to the Testing Center at (903)988-3707. YOU WILL BE REQUIRED TO PROVIDE A RECEIPT FOR YOUR TRANSACTION ON TEST DAY. Candidates without a Cashier's receipt WILL NOT be allowed to test upon arrival.**

Schedule is subject to change

TEST DATE	TEST TIME	DEADLINE DATE
Tues. July 5, 2011	1 pm	Thurs. Jun 30
Thurs. July 14, 2011	8:30 am	Tues. Jul 12
Tues. July 19, 2011	1 pm	Fri. Jul 15
Thurs. July 28, 2011	8:30 am	Tues. Jul 26
Tues. Aug 2, 2011	1 pm	Fri. July 29
Tues. Aug 30, 2011	1 pm	Fri. Aug 26
Thurs. Oct 13, 2011	8:30 am	Tues. Oct 11
Tues. Oct 25, 2011	1 pm	Fri. Oct 21
Thurs. Nov 3, 2011	8:30 am	Tues. Nov 1
Tues. Nov 15, 2011	1 pm	Fri. Nov 11
Wed. Nov 30, 2011	1 pm	Mon. Nov 28

### Reporting Time:

- Report to the Testing Center at least 15 minutes prior to the test start time.
- Late examinees will not be admitted
- Examinees will have 5 hours to complete the exam once actual testing begins.
- Examinees are not required to retake sections already passed on the THEA, Quick THEA, ACCUPLACER or other alternative tests.

### Examinees should bring the following on test day:

- **TWO** forms of identification (one must be a photo id. - driver's license, passport, yearbook photo, or employee badge). Acceptable forms of none photo id include a social security card, insurance card, library card or a birth certificate.
- Two #2 pencils (not mechanical)
- Four-function calculator if taking the Mathematics section of the exam. Scientific, graphing and programmable calculators are not permitted.

### General Information:

- Only restroom breaks will be allowed during the test.
- Students with special accommodation requests should take the Saturday THEA or ACCUPLACER exam.
- Students may take a free practice test by visiting [www.thea.nesinc.com](http://www.thea.nesinc.com).
- Students must wait at least 30 days before retesting.
- **Students who do not have a high school diploma or GED must take the ACCUPLACER exam for Ability to Benefit purposes.\***

**Scores from the Quick THEA are mailed from the testing company to the student 7-10 days from the test date. The Testing Center does not receive test scores.**

If you have questions you may call the Testing Center at 903-983-8690 or email us at [testing@kilgore.edu](mailto:testing@kilgore.edu).

**Visit our website to view this schedule and other useful information [www.kilgore.edu/testing.asp](http://www.kilgore.edu/testing.asp)**

*Kilgore College seeks to provide equal educational and employment opportunities without regard to race, color, religion, national origin, sex, age, disability, marital status or veteran status.*

# Quick THEA Test Registration Form

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**YOU MUST PAY YOUR TESTING FEE TO THE CASHIER AT (903)983-8108 BEFORE FAXING THIS FORM TO (903)988-3707 however, payment of test fee DOES NOT confirm registration.** This registration form MUST be submitted to the Testing Center along with cashier's receipt or receipt #.

Test Date: \_\_\_\_\_/\_\_\_\_\_/20\_\_\_\_\_

Daytime Telephone Number: (\_\_\_\_) \_\_\_\_\_-\_\_\_\_\_

Name (Please Print): \_\_\_\_\_  
(Last Name) (MI) (First Name)

Mailing Address: \_\_\_\_\_  
Street Address City State & ZIP Code

Social Security Number: \_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_ Sex: \_\_\_\_ Date of Birth: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
(Month) (Day) (Year)

### Identity Certification Statement

"I certify that I am the person whose name and signature appear on this form."

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### Score Cancellation Policy

I understand that cellular devices are **STRICTLY** prohibited in the testing center and that I must, upon arrival to test, turn off **completely** my cellular equipment. I further understand that if a cellular device in my possession sounds, vibrates or makes any distracting noise whatsoever, my test scores will be cancelled.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### Identification Policy

I understand that I must provide **two** valid forms of id, one bearing a recent, unexpired photo upon arrival to test. I also understand that I will not be able to test if I do not provide **two** valid forms of id upon arrival to test.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### Retesting Policy

I understand that I must wait at least 30 calendar days before attempting to retake the THEA Quick test. I also understand that this includes sections of the test not previously taken.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### Sign & Date here if you are NOT the person taking this exam.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### Special Note for those faxing their registration forms:

- ❖ **If you are faxing this form, you must first pay your \$59.00 fee to the Cashier's Office by calling (903)983-8108. Then fax this form with your receipt number(##) to the Testing Center at (903)988-3707. PAYMENT OF TEST FEE DOES NOT CONFIRM REGISTRATION.**
- ❖ **Once your registration and payment information is received, we will call to confirm or reschedule (if desired date is not available) your registration.**
- ❖ **YOU WILL BE REQUIRED TO PROVIDE A RECEIPT FOR YOUR TRANSACTION ON TEST DAY. Candidates without a Cashier's receipt WILL NOT be allowed to test upon arrival.**

### TESTING FEES ARE NON-REFUNDABLE