

**BJU Press Testing Center**  
1430 Wade Hampton Blvd., Suite 211A  
Greenville, SC 29609  
Phone: 864.770.1381  
Email: [testingcenter@bjupress.com](mailto:testingcenter@bjupress.com)  
Fax: 864.770.1351



### *Request for a Proctored Exam at the BJU Press Testing Center*

Please submit this completed form to the Testing Center. You may mail it to us at the address listed or drop it by our office Monday – Friday, 8 a.m. – 5 p.m. We will also accept it via fax or email (attach a scanned copy of the completed form to your email).

A nonrefundable, \$60 fee is required to reserve a test date. Upon receipt of this form, we will contact you for your payment information (only credit or debit cards accepted) and to schedule your testing appointment. (Please contact us *at least* 5 days before your desired appointment time.)

#### **Please print clearly**

Student name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

*Please **DO NOT** include any credit card information on this form. Payment arrangements will be made when scheduling your test appointment.*

#### **Test Information**

School name \_\_\_\_\_

Address \_\_\_\_\_

Phone number \_\_\_\_\_

Course name \_\_\_\_\_

Professor's name \_\_\_\_\_

Professor's email \_\_\_\_\_

Test name \_\_\_\_\_

Circle exam type: Paper/pencil      Computer-based

*Student's Signature* \_\_\_\_\_ *Date* \_\_\_\_\_

FOR OFFICE USE ONLY—NOTES ON STATUS OF REQUEST