

2011-12 CHANGE REQUEST For Test Center and Date



DO NOT USE THIS FORM TO REGISTER.

**Test center change requests must be received by the late registration date.
Test date change requests must be received no later than 3 full days prior to your original test date.**

Mail this completed form with your payment to:
ETS—ParaPro Assessment
PO Box 6062
Princeton, NJ 08541-6062

PLEASE PRINT ALL INFORMATION BELOW.

CANDIDATE ID NUMBER
(If available)

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NAME: Print your last name, first name, and middle initial.

LAST NAME	FIRST NAME	M.I.

PRESENT ADDRESS: Number and Street (include apartment number)

Number and Street				Refer to the Country Code List in the Bulletin.
City	State or Province	ZIP or Postal Code	Country Code	

Indicate the changes you are requesting.

Center Date

DATE OF BIRTH	SOCIAL SECURITY NUMBER	DAYTIME TELEPHONE NUMBER
19 ____ Month Day Year	____ - ____ - ____ - - -	____ - ____ - ____ - - -

Check the test date for which you are registered.

September 17, 2011
 January 14, 2012
 June 9, 2012

Note: The changes you request on this form apply ONLY to the one test date you check.

TEST CENTER CHANGE (Use this section to change your test center.)

ORIGINAL TEST CENTER (from the Test Center List in the Bulletin)

Test Center Number	Institution	City	State or Province
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NEW TEST CENTER (from the Test Center in the Bulletin)

Test Center Number	Institution	City	State or Province
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TEST DATE CHANGE

New test date requested:

January 14, 2012 June 9, 2012

Note: You cannot transfer to a test date in the next testing year.

FEES

Change fee..... \$ 45.00

In Canada, add GST/HST and QST to total remittance.

GST/HST Reg. #131414468 RT..... \$ _____

QST Reg. #1087967545..... \$ _____

Add Value Added Tax or similar taxes where applicable.*... \$ _____

TOTAL AMOUNT DUE..... \$ _____

***See "Fees" in the About the Test section of the ParaPro website for information about taxes.**

NOTE: If changing or adding a test results in an overpayment to ETS, you will receive a refund in four to six weeks.

FOR ETS USE ONLY

Waiver Code

Voucher Amount	

PAYMENT: Please make check or money order payable to ETS—The Praxis Series. Do not send cash. Orders received without payment or with incorrect payment will be returned.

Payment enclosed
 American Express®
 Discover®
 MasterCard®
 Visa®
 JCB®

Cardholder's Signature

Credit/Debit Card Number

Expiration Date

Signature	Date