MAIL this page (and the non-refundable fee) to the address below – be sure you address it correctly. Forms and payment cannot be accepted in person. PLEASE PRINT LEGIBLY. If you live in an apartment, don’t forget to list the #.

LEGAL NAME_____________________________________

(First on your government ID) No middle names

Mailing Address: ________________________________________________________

(# & street) ____________________________ (apt. #) ____________________________

(city) ____________________________ (state) ____________________________ (zip)

Daytime Phone #: (_____) ____________________________ Social Security # (required) _______ - _______ - _______

Email: _____________________________________________ Birth Date ________________________

I HAVE GOVERNMENT ID: _______ YES _______ NO (If no, review Required ID information)

PLEASE CIRCLE THE TEST DATE OF YOUR CHOICE, UNDER THE TEST YOU NEED ON THE CHART BELOW. INCOMPLETE FORMS WILL BE RETURNED AND MAY RESULT IN YOUR FORM NOT BEING SUBMITTED ON TIME. FORMS MAY NOT BE SUBMITTED IN PERSON – THEY MUST BE MAILED!

<table>
<thead>
<tr>
<th>Test Only</th>
<th>Test Only</th>
<th>Test Only</th>
<th>Registration</th>
<th>AND Forms &amp; FEES must be received in the mail by this date:</th>
<th>Scores will be mailed to you around:</th>
</tr>
</thead>
<tbody>
<tr>
<td>EPT Only</td>
<td>ELM Only</td>
<td>EPT/ELM (Both</td>
<td>Postmark (mailed by) Deadline</td>
<td>September 20, 2011</td>
<td>November 12, 2011</td>
</tr>
<tr>
<td>$18.00</td>
<td>$18.00</td>
<td>$36.00</td>
<td>September 16, 2011</td>
<td>December 9, 2011</td>
<td></td>
</tr>
<tr>
<td>October 1, 2011 ($18)</td>
<td>October 1, 2011 ($18)</td>
<td>October 1, 2011 ($36)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

___ Saturday Sabbath observers: attach letter on official letterhead AND your class and work schedules

___ Disabled students: attach special request form (from our website) AND your class and work schedules

My signature below indicates that I have read the information on this application and understand that there are no refunds (or transfer of fees) for this test under any circumstances. I also understand that it is my responsibility to obtain specific reporting information by Tuesday before the test day as indicated on the “EPT/ELM Information Page.” I also understand that the Testing Office will NOT be open the day before the test in order to prepare for the test so I must obtain information prior to that time.

DATE: ___________________________ NOTE: For admission purposes, YOUR SIGNATURE must be here - not your parent's

NO CASH ACCEPTED. TEST FEES CANNOT BE REFUNDED OR TRANSFERRED.

MAKE YOUR CHECK OR MONEY ORDER PAYABLE TO: CSUS TESTING OFFICE.

Please be sure you address the envelope exactly as shown below or it may not arrive on time:

TESTING OFFICE
CSU STANISLAUS
One University Circle
TURLOCK CA 95382

HAVE YOU
• CIRCLED THE DATE IN THE COLUMN OF THE TEST YOU INTEND TO TAKE?
• ENCLOSED YOUR SIGNED CHECK/MONEY ORDER MADE PAYBLE AS SHOWN ABOVE?