



Health Occupations Basic Entrance Test (HOBET)
Division of Student Affairs
Room 211, Memorial College Center
Armstrong Atlantic State University
912-344-2582

Registering for the HOBET

HOBET tests are given every Wednesday at 9:00 a.m. Contact Student Affairs, 912/344-2582 or MCC 211, to schedule a test. Once the test is scheduled, complete the test application form and submit it with the test fee of \$45. Payment and application form must be received prior to test date to secure test time.

In person: Take the test registration form and fee to the Student Affairs office in the Memorial College Center, Room 211.

By mail: Send test application form and your check, payable to Armstrong Atlantic State University, to: Student Affairs, Armstrong Atlantic State University, MCC Room 211, Attn: Testing Services, 11935 Abercorn St., Savannah, GA 31419-1997.

By Visa or MasterCard: Complete and sign the account information area on the back of the HOBET Application Form below. Take form to the Student Affairs office in the Memorial College Center, Room 211, or fax both sides to the Student Affairs office at 912-344-3475.

On the Day of the Test

Report to Memorial College Center Room 211 at least 10-15 min. before the start of the exam. Bring a picture id. The test session will be approximately two and a half hours. **Late arrivals will not be admitted to take the test!**

**HOBET TESTS ARE GIVEN ON WEDNESDAYS AT
 9:00 A.M.**

**Report to MCC, Room 211 at least 10-15 minutes
 before the start of the exam!**

----- (Cut along dotted line and submit form below with payment.) -----

Armstrong Atlantic State University
2009-2010 Health Occupations Basic Entrance Test Application Form Fee Enclosed: \$45

Test Date: _____

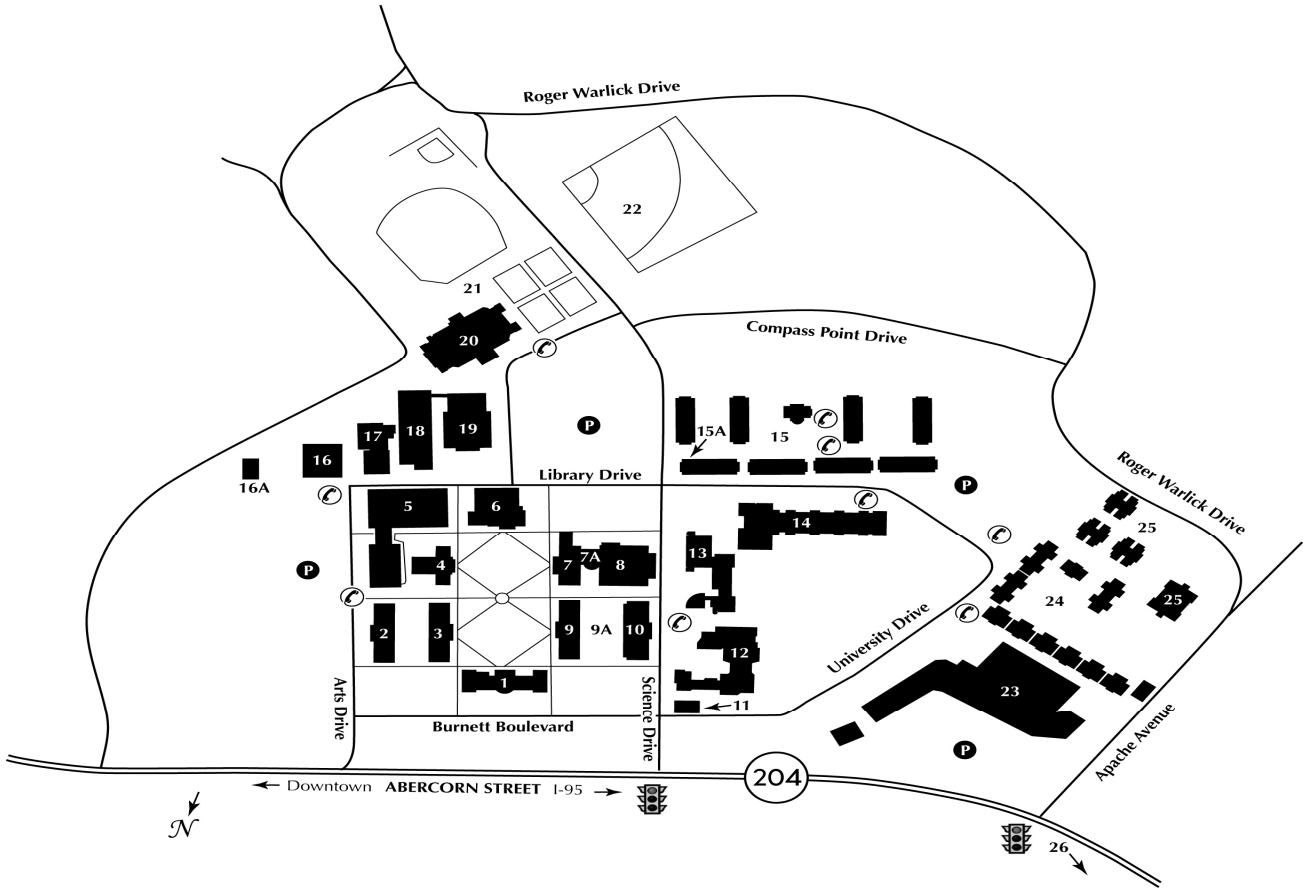
| | | | |
|--------------|--------|--------|----------------------|
| Name (first) | (m.i.) | (last) | 907 # (Student ID #) |
|--------------|--------|--------|----------------------|

| | |
|-----------------|---------------|
| Mailing Address | Date of Birth |
|-----------------|---------------|

| | | | | |
|------|-------|----------|------------|------------|
| City | State | Zip Code | Home Phone | Work Phone |
|------|-------|----------|------------|------------|

Email _____

If you are paying by credit card, please turn to the back to complete your payment information.



From Abercorn, turn onto Science Drive at the traffic light and park in nearby parking lots (#17) or in any curbside spaces marked in white. (Do not park in the spaces marked faculty or staff.) The MCC building is # 8 on the map.

------(Cut along dotted line and submit the form below with payment)-----

Complete this area when paying with a credit card. **Print the information in the space below.**

Take this form to AASU, Student Affairs, MCC 211, 11935 Abercorn St., Savannah, GA 31419-1997.

MasterCard Visa Expiration Date -

 3 digit security code (located on back of card)

Print Name: _____ **Student ID # (907)** _____

Test Date: _____

Billing Address: _____

_____ **Zip** _____

Signature of Card Holder _____ **Date** _____

There is a \$25.00 processing fee for Stop Payments and/or Declined Credit Card Payments