Registration Form – NIU GMAT Online Test Prep

Register:
1. FAX completed reservation form, using your credit card for payment to (815) 753-5202.
2. MAIL your completed reservation form with your check to: CLA&S External Programming, ATTN: GMAT Online Test Prep, Northern Illinois University, DeKalb, Illinois 60115.

NIU GMAT Online Test Prep - Event #99799
Northern Illinois University, CLA&S External Programming, DeKalb, Illinois

Fee: $275. Registration fee includes five months of Pearl Online Plus, pre- and post-assessments, paper-based or online assessment reports, online Cambridge practice tests, Moodle-enabled student progress tracking, comprehension lesson content, interactive lessons, knowledge measuring quizzes, and timed tests.

An email will be sent by Cambridge after payment is received granting access to the online test prep website.

Questions: Contact College of Liberal Arts & Sciences External Programming at (815) 753-5200 or LASEP@niu.edu.

Name__________________________________________________________________________________
Address________________________________________________________________________________
City_________________________________ State _____________________ Zip_____________________
School_________________________________________________________________________________
Day Phone ________________________ Cell Phone ___________________________________________
Email (required)_________________________________________________________________________

[    ] Check here and attach an explanation (required) if you have special needs that are regulated by the Americans with Disabilities Act. (Contact NIU’s Disability Resource Center for assistance at 753-1303 or www.niu.edu/disability; participants are responsible for any non-credit accommodation charges.)

$______Total

Payment Method: [   ] Enclosed is a check payable to Northern Illinois University.
[   ] Charge fee to: [   ] Discover [   ] MasterCard [   ] American Express (Sorry, we cannot accept VISA.)

Name as it appears on credit card__________________________________________________________

Credit Card billing address_______________________________________________________________

City________________________ State______________ Zip Code (+4) __________________________

Account #_________________________ Exp. date __________________

Signature_____________________________________________________________________________

Cancelation/Refund Policy: All registrations confirmed by payment. No refunds will be granted.