

CONTINUING EDUCATION
DISTANCE EDUCATION CENTER

INDIVIDUAL PURCHASE OPTION

For institutional order form go to
<http://www.utexas.edu/cee/dec/k12/bulkorder.shtml>

FOR OFFICE USE ONLY	
Exam Form	
Materials	

CREDIT BY EXAMINATION FORM / EXAMINATION FOR ACCELERATION
(EXAM MUST BE TAKEN WITHIN 60 DAYS OF ENROLLMENT.)

PERSONAL INFORMATION (Please print in ink)			PAYMENT			
Social Security Number* _____ Birthdate (mm-dd-yyyy) _____ Check one <input type="checkbox"/> Male <input type="checkbox"/> Female		<input type="checkbox"/> Money Order		<input type="checkbox"/> Check # _____		
Name: Last _____ First _____ M.I. _____ Maiden _____			Driver's license # _____ State _____ Please include student's social security number in memo on check. Please do not staple check to enrollment form. Make checks payable to The University of Texas at Austin.			
Address: Street _____ Apt. # _____ City _____ State _____ ZIP _____			<input type="checkbox"/> Credit Card <input type="checkbox"/> VISA <input type="checkbox"/> MasterCard <input type="checkbox"/> Discover <input type="checkbox"/> American Express			
Phone: () () Home Telephone _____ Business Telephone _____			Number _____ Exp. Date _____			
Email: _____			Print Cardholder's Name _____			
See our catalog or our web site for a list of subjects offered. SUBJECT AND SEMESTER (if applicable) REQUESTED: (For example, Eng 1 A or US Government)			CREDIT TYPE		# of Exams Credits Cost Total	
			Examination for Acceleration Credit by Exam (prior instruction)		1/2 Credit \$30 \$	
			<input type="checkbox"/> <input type="checkbox"/>		1 Credit \$60 \$	
			<input type="checkbox"/> <input type="checkbox"/>		Total to be paid \$	

Why are you taking this exam? (Check all that apply) Trying to get ahead Did not pass course before Did not finish course before

Moved to a new school Other (explain) _____

I HEARD ABOUT THIS COURSE FROM (Choose all that apply)

Advertisement Brochure/Catalog Friend Counselor, Principal or School Web Other _____

TESTING LOCATION	TESTING APPROVAL (Please print in ink.)
Indicate where you will take your examination. Check only one option. <input type="checkbox"/> Distance Education Testing Center (Located in Austin) H.S. students only. <input type="checkbox"/> Your School (Complete supervisor information below.) Exam must be supervised by a counselor, registrar, principal, or superintendent. Any other supervisor must be approved by the Distance Education Center testing supervisor and your school. Do not forget your photo ID when you arrive for testing. Exam to be supervised by: Name _____ Title _____ School Name _____ School Address _____ City _____ State _____ ZIP _____ School Phone _____ Email _____	<input type="checkbox"/> Home School (Fill in name and signature of parent or guardian) <input type="checkbox"/> Public and private schools (Test scores will be sent directly to the school approving the registration.) <input type="checkbox"/> UTHS Registration approved by: Name _____ Title _____ School Name _____ School Address _____ City _____ State _____ ZIP _____ School Phone _____ Email _____ Signature _____ Date _____

STUDENT SIGNATURE

In signing this application, I agree to abide by the policies governing Credit by Examination, and Continuing Education's Distance Education Center, UT Austin. I understand that I can access a copy of the catalog with a full listing of policies and procedures at www.utexas.edu/cee/dec/ or obtain one free by calling 1-888-232-4723 or (512) 232-5000.

Parent's Signature _____ Date _____
(Required unless student is over 17 years of age or enrolled in the UT HS Diploma Program)

Applicant's Signature _____ Date _____

INSTRUCTIONS



To register by mail:
Distance Education Center
P.O. Box 7700
Austin, TX 78713-7700



To register by fax:
512-475-7933



For more information:
www.utexas.edu/cee/dec



For more information,
call 1-888-232-4723
or 512-232-5000

*SSN DISCLOSURE

* Disclosure of your Social Security number ("SSN") is requested for the student records system of The University of Texas at Austin (the "University") and for compliance with Federal and State reporting requirements. Federal law requires that you provide your SSN if you are applying for financial aid. Although an SSN is not required for admission to the University, failure to provide your SSN may result in delays in processing your application or in the University's inability to match your application with transcripts, test scores, and other materials. Student SSNs are maintained and used by the University for financial aid, internal verification, and administrative purposes, and for reports to Federal and State agencies as required by law. The privacy and confidentiality of student records is protected by law and the University will not disclose your SSN without your consent for any other purposes except as allowed by law.