



"Prepares learners for a lifetime of success."

Nursing Assistant test out payment form

IF YOU ARE A SELF-PAYING STUDENT YOU MUST PAY ONLINE PRIOR TO TESTING. NO CASH OR CHECKS WILL BE ACCEPTED. PAYMENT MUST BE DONE 48 HOURS BEFORE TEST OUT DATE. NO SHOWS/LATE ARRIVALS WILL NOT BE REFUNDED.

Please return form to: amber.knapper@mnwest.edu

First/Last Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Date of Birth _____

Email address _____

Have you take a Sate approved Nursing Assistant course within the last 2 years? ____ Yes ____ No. (If no form 1101 will need to be filled out and returned to MN West before you can be registered)

Testing location and date (Check location)

Granite Falls ____ Testing Date _____ Jackson ____ Testing Date _____

Testing available (Please check one)

Knowledge/Skills \$250.00 ____

Retake Knowledge \$110.00 ____

Retake Skills \$140.00 ____

Payment options: Self-pay or Facility pay

Self-pay signature _____ Date _____

Facility pay name/address _____

Facility contact _____ Phone number _____

Notice: You are not legally obligated to provide any of the above information. However, it may be difficult for our office to provide adequate services if we do not receive the appropriate information. This information will be kept confidential. If you checked the self-pay option payment must be made within 48 hours of testing.