

If you are requesting off-site testing for the HOAE exam for Ridgetown Campus – please read and follow the instructions below. Providing **all** the required information allows a test to be sent to your proctor by e-mail the day before the date and time arranged with your proctor to complete the test.

1. Applicant **MUST BE** more than 3 hours from Ridgetown Campus.
2. Applicant **MUST** contact **Judy O'Brien** **for approval** prior to arranging a proctor.
3. Applicant **MUST ARRANGE** for a proctor at a college or university in your area.
4. Applicant **MUST HAVE** access to a stable internet connection for 3 hours in a quiet, private area.
5. Applicant must **COMPLETE and FAX** the next page. Details required **MUST** include:
 - A. Proctor's credentials and title
 - B. Proctor's e-mail address, phone number, address, & fax number
 - C. Date scheduled for the testing (note we need a minimum of 5 days notice to arrange testing)
 - D. Applicant Information **MUST** include the following:
 - Applicant name
 - OCAS (Ontario Colleges.ca) application number
 - Program
 - E-Mail address
 - Day and evening phone numbers
 - Home mailing address
6. All Information must be **faxed** to 519-674-1675. Veterinary Technology Testing, Attention: Judy O'Brien or emailed to jobrien@ridgetownc.uoguelph.ca

NOTE: *Please keep in mind that your test **cannot** be sent to your proctor if the necessary information is not received at least 5 days prior to the test date and if payment of testing fee information is not received.*

IMPORTANT:

Once we receive **ALL** the required information and payment, we will finalize details with the proctor. Testing information will be sent the day before the arranged test date, using your proctor's e mail address.

Office Use Only

Date Request Received
Date Payment Processed:

Date Test Sent:
Date Test Closed:

Application for Off-site HOAE testing – 2012

Complete the following information and fax or email

- o Fax to 519-674-1675
- o E-mail to jobrien@ridgetownc.uoguelph.ca

*(Please keep in mind that your test **cannot** be sent to your proctor if this page is incomplete and/or not received at least 5 days prior to the test date and if payment of testing fee information is not received.)*

Applicant Information

Applicant Name		
OCAS Number	12- _____	
Program you are testing for		
E-mail Address		
Phone Numbers	Day	
	Evening	
Home Mailing Address		
Applicant Signature:	Date:	

Proctor Information

Proctor's Name, Title		
College or University		
Address		
Fax Number		
E-mail Address		
Phone Numbers	Day	
	Evening	
Date & Time test is scheduled *minimum 5 days notice required		
Proctor's Signature:	Date:	

Payment Information

Type of Credit Card: (circle one) VISA / MASTER CARD	Credit Card Number:
Name of Credit Card Holder:	Expiry Date of Credit Card:

Office Use Only

Date Request Received
Date Payment Processed:

Date Test Sent:
Date Test Closed: