



# Harmony Health Care Institute

## Entrance Test Registration Form

### Directions:

- We except cash or money order only for the fee. It is non-refundable and non-transferable and must be paid at the time of registering for the test. Money orders should be made out to *Harmony Health Care Institute*.
- Photo ID must be presented at the time of testing. (*You must be 18 years or older*)
- Calculators are not allowed. However you will be given paper and pencil for your math calculations to use as needed.
- Study guides *are* available. Please ask for information.

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Last Name	First Name	Middle Initial
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Email Address	SS#
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Mailing Address	City	State	Zip Code
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Home Phone	Cell Phone
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Are you currently Harmony Health Care Institute Student? Yes\_\_\_\_\_ No\_\_\_\_\_

Have you taken the entrance test before? Yes\_\_\_\_\_ No\_\_\_\_\_

**I have paid the required fee. I am aware that this fee is non- refundable and non transferable. Payment must be submitted with this registration.**

Date:\_\_\_\_\_ Applicant Signature: \_\_\_\_\_