

Withdrawal/Refund Request Form for Computer-Based Testing



Mail to:

CEOE Program
Evaluation Systems
Pearson
P.O. Box 660
Amherst, MA 01004-9007

Fax number: (413) 256-7076

IMPORTANT INFORMATION

Completion of this form signifies that you are withdrawing your computer-based testing registration. In order to withdraw your registration and receive a refund, you must complete the following steps:

1. If you have already scheduled your test appointment, you must first cancel your test appointment on the Pearson VUE Web site at www.pearsonvue.com/ceoe. The deadline for canceling your test appointment is one business day (24 hours) before your scheduled testing time.
 2. Complete this form and then mail or fax it to Evaluation Systems. Your refund will be issued by Evaluation Systems within four weeks of the receipt of your request.
- ★ You will receive a full refund of the \$75 OGET test fee or the \$150 OPTE test fee.
 - ★ The \$35 computer-based testing fee will not be refunded.
 - ★ The \$40 registration processing fee, where applicable, will not be refunded.

1. Name

Last

First

Middle
Initial

2. Address Check here if this address is different from the address on original registration.

P.O. Box or Street Address and Apartment Number

City or Town

State

ZIP Code

3. Social Security Number

4. Daytime Telephone Number

Area Code

5. Test(s) for which you would like to withdraw your registration:

- OGET
- OPTE: PK-8
- OPTE: 6-12

6. I understand that in order for me to receive a partial refund according to the guidelines presented on this form, I must have canceled my test appointment, if I scheduled one, on the Pearson VUE Web site at least 24 hours in advance of the test appointment. I certify that I am the person whose name and address appear on this form.

Signature _____

Date _____

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