

**NON-CREDIT REGISTRATION FORM**

“Preparation for the Illinois Test of Academic Proficiency”

**Please Print or Type:**Name \_\_\_\_\_,  
Last First Middle Initial

Street Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone: Evening \_\_\_\_\_ Daytime \_\_\_\_\_

E-mail address: \_\_\_\_\_

GSU Student ☐ Yes ☐ No If “Yes” \_\_\_\_UG \_\_\_\_GRAD

GSU Student ID number: \_\_\_\_\_ Program: \_\_\_\_\_

Please check all that are true for you:

\_\_\_\_ I have already taken the TAP or ACT exam \_\_\_\_ (enter number 1-4) times.

Date(s) Taken: \_\_\_\_\_

I have passed the following parts of the TAP exam:

\_\_\_\_ Mathematics \_\_\_\_ Reading \_\_\_\_ Language Arts \_\_\_\_ Writing

\_\_\_\_ I am currently registered to take the TAP or ACT exam on: (date) \_\_\_\_\_

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Dates: Fridays, June 5<sup>th</sup> and 12<sup>th</sup>, 2015 4:30pm-8:30pm, andSaturdays, June 6<sup>th</sup> and 13<sup>th</sup>, 2015 9am – 1pm**Classes meet at GSU, Room TBD****Fee: \$25.00 for GSU students/\$50.00 for non-GSU students.****All Registration forms must be received at least 48 hours before the first session begins.****No exceptions! GSU Students will be given first priority for registration.**

**You will receive an email confirmation before the first session with additional information if your enrollment request is accepted. \*\*Please Note: Fee will be collected during the first workshop session. Bring a check or money order made payable to: Governors State University. No credit cards accepted.\*\***

Signature of Participant \_\_\_\_\_ Date \_\_\_\_\_

Mail or email or fax application to:

Renee K. Zdych; [rzdych@govst.edu](mailto:rzdych@govst.edu); fax no.: 708-534-8451

Director, Academic &amp; Student Services

Governors State University

One University Parkway, G249

University Park, IL 60484

Date received: \_\_\_\_\_

Staff: \_\_\_\_\_