



Police Testing Alliance Registration Form

All testing will be done at Great Bay Community College, 320 Corporate Drive, Portsmouth, NH

An entry-level police officer examination will be held on the following Saturday dates in 2009/10:

Circle the date of the test you wish to take **March 27, 2010** **June 26, 2010** **Sept. 18, 2010** **Jan. 8, 2011**

To register for this class you must complete this form and return it to the address listed below, along with a non-refundable fee of \$30.00. Your registration AND fee must be received by 4:00 pm the Wednesday prior to the scheduled testing date to be valid. You will receive verification by mail confirming your registration for the scheduled test. According to Board policy, all workshops must be dropped three days prior to the scheduled date in order to receive a refund.

Candidates requesting accommodations under the Americans With Disabilities Act must notify the Great Bay Community College Police Testing Alliance **in writing** about the specifics of the desired accommodation prior to the closing date of the registration so that appropriate arrangements may be made. Documentation supporting the specific disability should be included with your request.

Name (First, Middle, Last): _____ SS# _____

Address: _____

City/Town _____ State _____ Zip Code _____

Email _____ Birth date ____/____/____

Phone (Home) (____) _____ - _____ (Cell) (____) _____ - _____

I am a certified Police Officer? YES _____ NO _____ If yes, Full-time _____ Part-time _____ State _____

I would like to be considered for positions that are: Full-time _____ Part-time _____ Both _____

COURSE #	COURSE NAME	CREDITS	COURSE CHARGES
NCMI50	Police Entrance Exam	N/A	\$30.00

Authorization for Release:

I hereby authorize *Great Bay Community College*, its agents and/or associates to release any or all of the results of the entry examination(s) and/or any related materials to the designated police departments for the purpose of determining candidate eligibility. I understand that my participation in the testing process does not constitute an offer of employment or advanced testing.

Signature of Applicant

Date

Please Note: Applicants must present their registration verification and a valid state issued driver's license or picture ID at the time of the examination. Mail or fax this form and the appropriate fee to:

Method of Payment

Check (made payable to GBCC) check number _____

Charge to MasterCard Visa Account # _____ Expiration Date: _____ V Code _____

Great Bay Community College
320 Corporate Drive Portsmouth NH 03801 Fax # (603) 431-3531