MILLER ANALOGIES TEST (MAT) REGISTRATION

Mail to: MAT Registration
Student Academic Services
Spring Hill College
4000 Dauphin Street
Mobile, AL 36608

Phone: 251-380-3470
Fax: 251-460-2187

FOR MORE INFORMATION ABOUT MAT: http://camellia.shc.edu/sas/testing/MAT.htm

PLEASE NOTE: MAT Registration Forms must be completed and received at Spring Hill College at least 24 hours before the requested testing date. The test fee is non-refundable. The fee may be applied to a rescheduled MAT date if the applicant calls to reschedule. Cancellation and rescheduling of test dates must be done no less than 24 hours before testing. If you have any questions or need to reschedule a testing date, you may call 380-3470 or e-mail agaw@shc.edu.

MAT APPLICANT INFORMATION

Your Name:_____
(Please print) First M.I. Last

Social Security Number_____ - ____ - _____ Sex: __Male __Female

Mailing Address:_____

_____
City State Zip/Postal Code

Day Phone#:_____ Evening Phone#:_____

E-mail Address:_____ Fax#:_____

College: _____ Program:_____

How many times have you taken the MAT? (Check one)
_____ none _____ 1 _____ 2 _____ 3 _____ 4 (or more)

If you have taken the MAT before, please submit your retest admission ticket with this form. The MAT cannot be retaken without an admission ticket.

Requested Test Date: _____/ _____/ _____
Month Day Year

Amount Enclosed: $_____

I hereby agree to the general policies and procedures concerning the MAT administration and payment of fees. I certify that I am the person who will take the test at the center and whose name and address appear on this form.

Signature:_____ Date:_____