

## Reservation for the GACE Paraprofessional Test Testing and Disability Center – Galloway Hall 1120 15<sup>th</sup> Street (706) 737-1469

Please complete this form and submit the registration fee of *\$38* to reserve the space and material needed for testing. This exam requires a 28-day waiting period for all retests. *The GACE Paraprofessional Assessment administration is computer-based and registration is limited.* 

Name (Please print): _			
Address:			
	State:		
Telephone Number:		Email:	
Date of birth:			
TEST DATE:	Have	e you previously taken t	this test? □ Yes □ No
Fees are NON-REFUNDABLE, NON-TRANSFERRABLE and are due at the time of registration. If			
you have a disability and need accommodations, please contact Testing and Disability			
Services (706) 737-1469.			
I realize that if I am absent on the day of the test, I forfeit the fees.			
Signature			Today's Date
		is registered fo	r the GACE to be given
University. Please do r signature! You must pay for po parking, you will	ng Center, located in Gallon not report until 8:45am an arking. This can be done value of the responsible for a \$50.0 fole and non-transferrable.	d make sure to bring a ia the ParkMobile App 00 fine from Parking a	valid photo ID with a . If you do not pay for
Test Date:	Registration Deadline:	Test Date:	Registration Deadline:
April 25, 2024	April 11, 2024	September 26, 2024	September 12 2024
May 30 2024	May 16, 2024	October 31 2024	October 17 2024
June 27 2024	June 13, 2024	November 21 2024	November 7 2024
July 25 2024	July 11, 2024	December 19 2024	December 5 2024
August 29 2024	August 15, 2024		
	•	-	
Signature of TDS Staff		Today's Date	
Fees Paid		Registered Testing Date	