



Office Use Only  
Date Paid/Initial

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## SCHOOLCRAFT COLLEGE TESTING CENTER

### Registration Form for Conference of Western Wayne Firefighter Tests

PLEASE PRINT CLEARLY

Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_ Last 4 digits of Social Security Number: \_\_\_\_\_

Name: \_\_\_\_\_ Today's Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_

Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

*I authorize release of test results to CWW and municipalities with whom I have applied for employment.*

**Signature:** \_\_\_\_\_

(See CWW brochure for test dates)

CPAT Test Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Fee: \$170

Written Test Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Fee: \$ 65

Registration Fee: \$ 25

*The Registration Fee must be paid by anyone who has not tested with the Conference of Western Wayne after July 2007.*

Enclose check or fill out credit card information and mail to:

Schoolcraft College, Testing Center, MC220, 18600 Haggerty Rd., Livonia, MI 48152

If paying by credit card, you may fax this form to 734-462-4808 or scan and email it to [testing@schoolcraft.edu](mailto:testing@schoolcraft.edu). All fees are non-refundable. Payment must be received before 5pm on the Thursday preceding test date. Valid photo ID is required on test day.

#### Credit Card Payment:

After receiving your emailed CWW Firefighter Test(s) Confirmation, please call Schoolcraft College Cashier's Office at 734-462-4449 to give your credit card information and complete the payment process within 2 business days.

ALL INFORMATION MUST BE PROVIDED. PAYMENT CANNOT BE PROCESSED UNLESS COMPLETE

#### **Office Use Only:**

Roster \_\_\_\_ Confirmation \_\_\_\_ Label \_\_\_\_ Database \_\_\_\_ Processed by \_\_\_\_

Date Received \_\_\_\_ Amount Paid \_\_\_\_ Payment Type \_\_\_\_ Emailed Cashiers \_\_\_\_

**Office Use Only: Cash Codes LAC/CLC 02-5610**