



D&S Diversified Technologies LLP

Headmaster LLP

HEADMASTER LLP
P.O. Box 6609, Helena, MT 59604-6609
800-393-8664 – Fax: 406-442-3357
www.hdmaster.com

*Innovative, quality technology solutions
throughout the United States since 1985.*

**NEVADA NURSING ASSISTANT
TEST SITE AGREEMENT – FORM 1502NV**

This agreement MUST be accompanied by Test Site Equipment List Affidavit - **Form 1503NV**

Facility Name: _____ Phone: (____) _____ - _____

Address: _____ City: _____ State: _____ Zip: _____

hereinafter known as the Testing Site, will allow Nursing Assistant Knowledge and Skill Tests to be administered at our facility, under the following guidelines.

As a FLEXIBLE In-Facility & Regional Test Site we agree to:

1. Submit NO more than sixteen Candidates per testing date (and no less than six) per RN Test Observer. (Most RN Observers will desire fewer than 16 candidates per test event and will require at least six to assemble their testing team.)
2. Complete and mail, fax or send an image of this Test Site Agreement **Form 1502NV** and Test Site Equipment List Affidavit **Form 1503NV** to Headmaster LLP.
3. Supply an approved area for testing NA candidates on the Knowledge and Skill Tests. The Knowledge test area and the skill test area may be used for up to 9 hours on test day when accommodating a full two flight test event.
4. Create test events in **WebETest®/TMU®** including contacting a certified RN test observer who will commit their test team to the test event created.
5. Use **WebETest®/TMU®** to schedule test seats for our own Candidates who complete our NSBN approved Nursing Assistant training course. (Browse to www.hdmaster.com) We understand we will receive a reimbursement of \$10/test component for each of our own candidates tested in this manner.
6. Assume all liability for our Candidates tested in our facility because they are our employees or trainees.
7. Unannounced visits by the Nevada State Board of Nursing and HEADMASTER LLP staff for the purpose of observing tests in progress.
8. Allow test slots we do reserve for our own candidates at least 5 business days prior to a scheduled test event to be used by candidates at large. We understand we will receive \$10/test component for each test component administered at our test site to cover any and all costs incurred. (i.e. \$20 if both knowledge and skill test components are administered to an at large candidate.)
9. Schedule additional mutually agreed upon test dates with Headmaster LLP as far in advance as possible, sufficient to meet needed testing demand in our area. We will receive \$10/test component administered at these **Regional** test events. HEADMASTER LLP staff will contact and schedule the test teams for any Regional events.
10. Allow an independently contracted RN Test Observer, their Actor, Knowledge Test Proctor (KTP), our own trained Candidates as well as at large test Candidates admittance to our approved Test Site. We will hold them accountable for damage, theft or any other act or action harmful to the facility in any way. Neither HEADMASTER LLP/D&S DT nor the Nevada State Board of Nursing assumes any liability for independently contracted RN Test Observers, their Actors, KTPs or any test Candidate.

As a CLOSED In-Facility Schedule Test Site we agree to:

1. Supply an area to be used by a HEADMASTER LLP certified, independently contracted, RN Test Observer and team for the purpose of administering Knowledge and Skill tests for up to sixteen Candidates per day per RN Test Observer. (Observers may desire a lower upper limit for their test events.) The area(s) will be free from distractions for up to nine hours on testing days. Tests will only be for our own candidates and we will not release empty seats to at large candidates or receive any compensation from HEADMASTER for any test components administered. We will pay a minimum fee to schedule a closed event equal to at least 6 candidates at the regular price, no matter how many fewer we test. Each additional candidate tested at a closed testing event over 6 candidates (up to the Observer's limit) will be at the regular price per each additional test component. (6 candidates for both the knowledge and skill test components would equal a minimum deposit of \$900 to schedule a closed test event.)
2. Complete and mail, fax or send an image of this Test Site Agreement **Form 1502NV** and Test Site Equipment List Affidavit **Form 1503NV** to Headmaster LLP.
3. Create test events in **WebETest®/TMU®** including contacting a certified RN test observer who will commit their test team to the test event created.
4. Unannounced visits by the Nevada State Board of Nursing and HEADMASTER LLP staff for the purpose of observing tests in progress.
5. Allow, on testing days, an independently contracted RN Test Observer, their Actor, Knowledge Test Proctor (KTP) and our own test Candidates admittance to our approved Test Site. We will hold them accountable for damage, theft or any other act or action harmful to the facility in any way. Neither HEADMASTER LLP nor the Nevada State Board of Nursing assumes any liability for independently contracted RN Test Observers, their Actors, KTPs or any test Candidate.

PHOTOGRAPHING OR VIDEOTAPING TEST EVENTS

- As a certification test vendor, Headmaster LLP must ensure the security of knowledge and skill test items and proprietary test delivery software.
- Certification test events are expected to be conducted in a distraction free environment with a high degree of personal privacy. Photographing, videotaping, recording via security or surveillance cameras or any other device while any Headmaster LLP knowledge or skill testing is being conducted is expressly prohibited unless advance written permission has been granted by Headmaster LLP and the Nevada State Board of Nursing.
- To host certification test events for test candidates, you agree that no electronic recording devices will be used to record sound or video of actual test candidates, test events or any part of test administration. You agree that to allow recording of certification testing events in progress without the express written consent of Headmaster LLP and the NSBN may result in the loss of your test site approval and/or training program approval and may subject you to prosecution by all affected parties to the full extent of the law.

I CERTIFY THAT OUR SITE IS UNDER NO AUTHORITATIVE SANCTIONS AND I HAVE READ, UNDERSTOOD AND WILL ABIDE BY ALL GUIDELINES LISTED.

Site Administrator Signature: _____ Date: ____/____/____

Contact Phone Number: _____ Fax #: _____

Print designated contact person: _____ Email: _____

HEADMASTER LLP/D&S DT use ONLY: Site #: _____ Assigned on ____/____/____ by _____ Confirmation letter emailed: ____/____/____