

D&S DIVERSIFIED TECHNOLOGIES

DBA HEADMASTER

333 OAKLAND AVE, FINDLAY, OH 45840

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PROVIDING MED TECH TESTING SOLUTIONS for ARIZONA

TESTING SITE AGREEMENT form 1502

This agreement MUST be accompanied by **Form 1503**

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

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

hereinafter known as the Testing Site, will allow MT Written and Skill Tests to be administered at our facility, under the following guidelines for FIXED **and/or** FLEXIBLE testing schedules.

As a FLEXIBLE Schedule Test Site (In Facility) we will comply with the following guidelines:

1. NO more than twelve Candidate applications may be submitted per testing date per Observer.
2. We will complete and mail or fax this **Form 1502 and Form 1503** to D&S Diversified Technologies.
3. We will supply D&S DIVERSIFIED TECHNOLOGIES an approved area for testing MT candidates on the Written and Skill Tests. The written test area and the skill test area may be used for up to 9 hours on test day.
4. We will contact an Evaluator/Observer on the D&S Diversified Technologies approved Evaluator/Observer list and mutually agree to a test date. We will then **IMMEDIATELY** contact (phone, fax or email) D&S Diversified Technologies and inform them of the scheduled test date.
5. We will use **Form 1101** and **Form 1402** to apply for tests for Candidates who complete our Arizona approved MED TECH training course.
6. We will assume all liability for our Candidates tested in our facility because they are our employees or trainees.
7. We agree to unannounced visits by the Arizona Board of Nursing and D&S DIVERSIFIED TECHNOLOGIES for the purpose of observing tests in progress.

As a FIXED Schedule Test Site (Regional) we will comply with the following guidelines:

1. We will supply an area to be used by a D&S DIVERSIFIED TECHNOLOGIES certified, independently contracted, Evaluator/Observer/ for the purpose of administering Written and Skill tests for up to twelve Candidates per day per Observer. The area(s) will be free from distractions for up to nine hours on testing days.
2. We will complete and mail or fax this **Form 1502 and Form 1503** to D&S DT.
3. We will mutually agree to schedule test dates up to fifty-two weeks in advance with D&S DT and/or schedule mutually agreed upon, site selected test dates as far in advance as possible, with D&S DIVERSIFIED TECHNOLOGIES.
4. We agree to unannounced visits by the Arizona Board of Nursing and D&S DT for the purpose of observing tests in progress.
5. On testing days, we will allow an independently contracted Observer, their Actor, WTP, and 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. D&S DIVERSIFIED TECHNOLOGIES assumes no liability for independently contracted Evaluators/Observer, their Actors, WTPs or Candidates.

I certify that our site is under no Arizona (AZBN) or DHS sanctions and I have read understood and will abide by the guidelines listed.

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

Contact Phone Number: _____ Fax #: _____

Print designated contact person: _____ Email: _____

D&S DIVERSIFIED TECHNOLOGIES use ONLY: Site # : _____
Assigned on ____/____/____ by _____ Confirmation letter faxed: ____/____/____