



D&S Diversified Technologies LLP

Headmaster LLP

D&S DIVERSIFIED TECHNOLOGIES, LLP -HEADMASTER, LLP
MT Office: P.O. Box 6609 | Helena, MT 59604-6609
OH Office: P.O. Box 418 | Findlay, OH 45839
(800)393-8664 | (888)401-0462 | (877)851-2355 | Fax: (406)442-3357
hdmaster@hdmaster.com | Website: www.hdmaster.com

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

TENNESSEE NURSE AIDE

CANDIDATE PAYMENT FORM 1402CND-TN

Candidate Information:

Last Name: _____ First Name: _____

Phone #: _____ Email: _____

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

Social Security Number: _____ Date of Birth: _____

[] MONEY ORDER/CASHIER'S CHECK PAYMENT:

Money Order/Cashier Check Number: _____

Make a money order/cashier check payable to: D&SDT and mail to - P.O. Box 6609 - Helena, MT 59604

[] CREDIT/DEBIT CARD PAYMENT (MasterCard or VISA only):

Card Number: _____ Card Expiration Date: _____ Zip Code Affiliated with Card: _____
(enter as 0000-0000-0000-0000) (mm/yy)

Printed Name on credit/debit card: _____ Signature of Cardholder: _____

Exam Fee Payment

Table with 6 columns: # REQUESTED, TESTS / SERVICE REQUESTED, SELF-PAY TESTING FEES, HFC FUNDED, TOTALS, CHECK IF ORAL NEEDED. Rows include Knowledge Test, Skill Test, Reschedule Fee, Test Review Fee, Refund Request Fee, No Show, Priority Fax Service, and a Total row.

ADA ACCOMMODATIONS

If you need special accommodations under the Americans with Disabilities Act: To qualify for special accommodations, you must provide written documentation of your disability along with your application. ADA Form 1404 is available at www.hdmaster.com or call D&SDT-Headmaster at (877)201-0758.

If this is a re-take test, I must re-test only on the portion that I failed. I understand that if I paid by credit card my credit card will be billed for the knowledge and/or skill test or for the portion of the test that I failed plus the fax fee (if I fax this payment form to D&SDT-Headmaster). PLEASE CALL (877)201-0758 IF YOU DO NOT RECEIVE AN E-MAIL AND/OR TEXT MESSAGE LETTING YOU KNOW YOUR FEES HAVE BEEN PAID AND YOU ARE READY TO SCHEDULE A TEST EVENT.

CANDIDATE'S SIGNATURE: _____

(Unsigned payment forms will not be processed, will be shredded if a credit/debit card payment is included, or will be mailed back if a money order or cashier's check is included.)