

WCC TEAS REGISTRATION FORM

A non-refundable testing fee (\$135.00) **MONEY ORDER** is required. Made payable to WCC FSA F.U.F. Account #3

Please Print Clearly in Ink

Applicant Signature

Name:						
Address:						
Date of Birth: Telephone Number: Home ()						
Cell ()) WCC Student ID: Mandatory						
WCC Student Email Address	::					
Check one: New Student to	WCC Cont	tinuing Student at WCC				
If applicable list another nam	ne under which your ed	lucational records may appear:				
Previously attended the WCG	C nursing program circle	e if applicable: YES NO				
Years attended at WCC nursi	ing program	Documented Accessibilities				
The TEAS Exam will be admir	nistered on the followin	ng dates for SPRING 2026 ADMISSION ONLY:				
Please indicate 3 choices (#1	., #2, #3) Limited seatin	g is available at each test choices not guaranteed.				
Saturday October 11, 2025,	, at 8:30A.M	October 11, 2025, at 11:30 A.M				
Monday October 13, 2025, a	at 8:30 A.M					
Wednesday October 15, 202	.5, at 11:30 A.M	October 15, 2025, 4:00 P.M.				
Thursday October 16, 2025,	at 4:00 P.M					
Saturday October 18, 2025, a	at 8:30 A.M	October 18, 2025, at 11:30 A. M				
•	n a test date. Once you	ewed and approved you will receive an email from ir test date is confirmed, we will not be able to consider				
**Students who violate WCC's te	esting policies and procedu	ures will automatically void their TEAS exam without				
reimbursement. As a result, thes WCC TFAS testing opportunities	•	the Nursing Department's review and right of refusal for any ful				

Date