1. Complete and return this application form prior to making a one-hour appointment for the written portion of the exam. Scan and email this form to scstesting@iastate.edu or fax a copy to (515) 294-3696. Upon receipt of your form, you will receive a confirmation email that you are registered for the written portion and a test appointment will be scheduled. **Reservations for the SpCm 212 test-out are limited to the first 24 applications each semester.**

2. Appointments for the written portion of the exam should be scheduled at least one week in advance. For a better chance of receiving your preferred testing appointment date and time, it is recommended you contact the Student Counseling Services Testing office at least two weeks in advance. The report location for the written test is the SCS Testing Office, Room 2062 Student Services.

3. When making your appointment, remember that in order to be eligible for the next offering of the oral portion of the exam, the written portion of the exam must be completed at least one week before that oral exam will be offered. (Oral exams are always held the Friday before classes begin for the Fall and Spring semesters).

Name: ____________________________________________ ISU ID#: __________________

(Print: last name, first name, middle initial)  
Phone: ___________________  E-mail: ___________________________

Major: ___________________  Advisor: _______________________

Classification: Fr., Soph., Jr., Sr.

Speech or performance-related experiences (high school course, theater, 4-H, job, university organizations, etc. use the back of the page as needed) ________________________

___________________________________________________________________________________

___________________________________________________________________________________

___________________________________________________________________________________

___________________________________________________________________________________

My strengths as a speaker include:____________________________________________

_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________

My weaknesses as a speaker include: __________________________________

_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________

Accommodations Requested: (Be sure to attach university accommodation documentation)________________________

___________________________________________________________________________________

___________________________________________________________________________________

___________________________________________________________________________________

___________________________________________________________________________________

My signature below verifies that I have given correct information on this form. I have read and understand the Credit-By-Exam/Test-Out information as written in the Iowa State University Bulletin. I understand that the fee of $100 for this exam will be placed on my university bill and that **I will be billed for this test even if I elect not to take it or do not pass.** I may cancel my reservation by contacting the testing office at least 48 hours prior to the scheduled time. If I do not report for the scheduled examination, I must initiate a new request, including the examination fee payment in order to take a future examination.

Signature: _____________________________________________ Date: ________________

**Bring your student ID to the test.**

Once you have successfully completed the written exam with an 80% or better, you will be scheduled to take the oral portion of the exam the Friday before classes begin for the new semester.