APPOINTMENT INFORMATION

I am taking this test for the following organization:

- CBSA
- CONSERVATION
- RCMP
- N/A: PRACTICE
- OTHER: ________________________________

1ST CHOICE: Date/Time ____________________
2ND CHOICE: Date/Time ____________________

Test completion standard: [ ] 4min 45 sec [ ] 4 min

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U OF M USE ONLY

FORMS: Date Received ____________ Time Received ____________ Data Entered by ____________

- Registration
- Release & Indemnity
- PAR-Q

PAYMENT Amount $ ____________ Date ____________ Processed by ____________

TEST DATE ____________ TEST TIME ____________ Phone Confirmation By ____________ Date ____________

Sept. 2020