Conference on Test Security
October 1-2, 2014, Iowa City, Iowa

Registration Form

_____   _____

First Name   Last Name

_____

Organization

_____   _____

Daytime Phone (w/ area code)   Cell Phone (w/area code)

Email Address: _____

The registration fee of $75 includes admission to the full conference program, transportation between the Iowa City Sheraton Hotel and the conference location on conference days, lunch and refreshments on October 1 and 2, and an hors d'oeuvres and cocktail reception on the evening of September 30. If you will be bringing a non-conference attending guest, they may attend the opening evening reception for an additional $30 per person.

☐   Check here if you will be bringing a non-conference guest to the opening reception.

Number of additional non-conference guests for opening reception: _____

☐   Check here if a vegetarian lunch option is preferred

Travel and hotel information have been posted to the conference website: https://cete.ku.edu/conference-test-security. Please arrange for your own travel and lodging.

Please mail this form with a check payable to: University of Kansas Center for Research to:

Center for Educational Testing and Evaluation
University of Kansas
Attn: Ronda Consolver
1122 West Campus Road, Rm. 720
Lawrence, KS 66045

REGISTRATION DEADLINE: AUGUST 29, 2014
CANCELLATION DATE FOR FULL REFUND: AUGUST 29, 2014

Contact Ronda Consolver (rcon@ku.edu) by August 29, 2014 to cancel a registration and request a refund.