

 716 McMurry Blvd East, Hartsville, TN 37074 and 415 Tennessee Blvd, Lebanon, TN 37087

Phone (615) 374-2147 or (615) 547-1128 http://www.tcathartsville.edu

HESI EXAM PRE-REGISTRATION FORM

Those interested in seeking admission to the Practical Nursing Program at the Tennessee College of Applied Technology Hartsville MUST first successfully pass the HESI exam. The test is scheduled to be given as follows:

DATE:

Wednesday, June 4, 2025, 9:00 a.m. Wednesday, August 13, 2025, 9:00 a.m.

Wednesday, June 11, 2025, 9:00 a.m.

 Wednesday, June 18, 2025, 9:00 a.m.

Wednesday, July 9, 2025, 9:00 a.m. Wednesday, September 17, 2025, 9:00 a.m.

 Wednesday, July 16, 2025, 9:00 a.m. Wednesday, September 24, 2025, 9:00 a.m.

 Wednesday, July 23, 2025, 9:00 a.m. Wednesday, October 1, 2025, 9:00 a.m.

 Wednesday, July 30, 2025, 9:00 a.m. Wednesday, October 8, 2025, 9:00 a.m.

 Wednesday, August 6, 2025, 9:00 a.m. Wednesday, October 15, 2025, 9:00 a.m.

(Note: 2.5- hours timed test. **PLEASE ARRIVE 30 MINUTES EARLY** to login to account.)

 PLACE: Tennessee College of Applied Technology Hartsville

 **716 McMurry Blvd East, Hartsville, TN 37074**

**(Upon arrival at Center, please enter at the entrance Office.) (LOCATION IS SUBJECT TO CHANGE)**

 COST: $ 50.00 (NON-REFUNDABLE and NON-TRANSFERABLE)

(Payment accepted by Cash, Money Order, Check, or Credit Card

Due to the increase in the number of prospective applicants, you can now pre-register for the HESI exam by filling out the Test Pre-Registration Form below, attaching your payment, and returning to the Center. In return, you will receive a receipt which will serve as your proof of registration (please bring this receipt and a photo ID with you when you come to be tested.)

NOTE: Please note that pre-registration is on a first-come/first-serve basis until registration is full (24 testers per exam time).

Also, please note that Registration/Payment on day of test is only optional, if space is available.

For math and reading practice test questions, please visit [www.hesia2practicetest.com](http://www.hesia2practicetest.com)

HESI EXAM PRE-REGISTRATION FORM

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Preferred Test Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Amount of Payment: $ 50.00 (please check) \_\_\_\_ Money Order \_\_\_ Check \_\_\_\_

(Please do not send Credit Card information or Cash in the mail)

**Payment is NON-REFUNDABLE AND NON-TRANSFERABLE**