



Hesi A2 Exam Registration Form

The Hesi exam is available for Medstar Washington Hospital Center Medical Imaging School Applicants. Please complete the following information to register for the Hesi exam to be administered by MWHC Medical Imaging School.

Applicant's Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Applicant's Contact Number: _____

Applicant's Email address:

Please Select one exam Date

04.05.17

05.31.17

06.28.17

- Space is limited please register early for the exam date of your choice. The exam Date selected will not be guaranteed.

Please mail or deliver this form along with total registration fee of 37.00 to:

***Checks/Money Orders are to be made payable to Medstar Washington Hospital center**

Medstar Washington Center
Medical Imaging School
110 Irving st NW
Washington, DC 20010
Attention: Shirley Douglass

Registration is due no later than **March 16, 2017**.

A confirmation letter will be sent once we receive your completed registration form and fees. The letter will include the testing location and directions to the testing site.

Registration fee is non refundable. Cancellations and Rescheduling of exam must be made 10 days prior to the date of the scheduled exam.