

**UNIVERSITY OF MOBILE SCHOOL OF NURSING  
ASSOCIATE DEGREE IN NURSING – A.D.N.**

*All students entering the ADN program beginning Fall 2008 must have one of the following:*

- 1) **A minimum score of 21 on the ACT exam.**  
*Students who wish to take the ACT exam should contact the University of Mobile Admissions Office for testing information and registration packets at 251-442-2273.*

- or -

- 2) **A minimum percentile score of 55 on the NLN-PAX-RN.**  
*To register for the PAX complete the bottom portion of this form and return to the School of Nursing. Your registration must be RECEIVED at least two weeks prior to testing date. .*  
***A non-refundable payment of \$55.00 must be received with your registration form.***  
***Money Orders and Cash ONLY – No personal checks accepted.***

**\*\* Remember, your testing fee is non-refundable**

NLN-PAX-RN Test Dates	<u>Registration Deadline</u> *( by NOON )*
<b>Thursday, January 24, 2008</b>	<b>Thursday, January 10, 2008</b>
<b>Thursday, February 28, 2008</b>	<b>Thursday, February 14, 2008</b>
<b>Thursday, April 3, 2008</b>	<b>Thursday, March 20, 2008</b>

*Testing will take place in Room 205 of the Weaver Building.. Please arrive no later than 9:45 a.m. in order to sign in and receive instructions. Bring two sharpened #2 pencils. The test will begin promptly at 10:00 a.m. There will be no late admittance. Be prepared to stay until at least 2:00 p.m. Only students who have pre-registered and pre-paid by the (12:00 NOON) Registration Deadline will be allowed to test. \*No Exceptions.*

***Keep the top portion of this page for your reference, return the part below.***

You may pick-up a Registration Form in Admissions, the ADN or BSN Nursing Buildings, or online at [www.umobile.edu/academics/nursing](http://www.umobile.edu/academics/nursing)

**All completed Registration Forms must be turned in by noon and accompanied with a testing fee of \$55.00 either by a Money Order or Cash by:**

**1. Mailing to:**

University of Mobile, School of Nursing  
 5735 College Parkway  
 Mobile, AL 36613  
***Attn: Vicky Stringer***

**2. Registering-In-Person**

Nursing Complex Building (gray trailer directly behind Lyon Chapel) and ***see: Vicky Stringer***

Name: \_\_\_\_\_ Social Security No: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_

**Choose test date requested:**

\_\_\_\_\_ Thursday, January 24, 2008  
 \_\_\_\_\_ Thursday, February 28, 2008  
 \_\_\_\_\_ Thursday, April 3, 2008

**Payment type:**

\_\_\_\_\_ Cash  
 \_\_\_\_\_ Money order