



**Nursing Department**  
**HESI Admission Assessment Payment Confirmation**

Please complete this form and pay the appropriate fee to the college cashier. Payment is due 10 days prior to scheduled exam date. Keep top portion for your records.

**Payment options:**

- **Cash, check, money order, or credit card: In person to the college cashier (Old Main 211)**
- **Check or money order mailed to: Bethany Lutheran College, Attn Cashier,  
700 Luther Drive, Mankato, MN 56001**
- **Credit card via phone: Cashier Phone 507-344-7304**

Name: \_\_\_\_\_ BLC ID#: \_\_\_\_\_ Transfer Student \_\_\_\_\_

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

\_\_\_ I will be testing in person/Date: \_\_\_\_\_

\_\_\_ I will be testing at a Prometrics Testing Center (Additional fee required and paid at testing center)

**HESI Admission Assessment Fee: \$48.00**

**Full refund is given if student cancels testing 7 business days prior to scheduled exam date**



**Nursing Department**  
**HESI Admission Assessment Payment Confirmation**

Please complete this form and pay the appropriate fee to the college cashier. Payment is due 10 days prior to scheduled exam date. Return bottom portion with your payment to reserve your test.

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**CASHIER USE ONLY**

INCOME ACCOUNT: 120-0-70409-4667

PAYMENT RECEIVED Date \_\_\_\_\_ Initials \_\_\_\_\_