

**GRE REVIEW CONTRACT OF PARTICIPATION  
MAIN CAMPUS  
FALL 2017**

Name: \_\_\_\_\_ Major: \_\_\_\_\_ SAM ID# \_\_\_\_\_

Check the session you would like to register for:                      **Saturday, Sept. 30th**                      **Saturday, Nov. 4th**

Check the following that applies to you:      McNair Program      Undergrad      Post Grad      Other

Permanent mailing address: \_\_\_\_\_

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

SHSU Email: \_\_\_\_\_ Phone #: \_\_\_\_\_

Have you already taken this exam once before (*check one*)?      YES                      NO

When do you plan to take/re-take the exam? \_\_\_\_\_

Specify the type of graduate program you are interested in:  
\_\_\_\_\_

What schools are you going to apply to?  
\_\_\_\_\_

How did you hear about this program?  
\_\_\_\_\_

**This contract must be signed in order to be officially registered for this program  
Please read and place your initials on the line provided by each statement.**

1. I understand I will need to have completed at least 50 hours of individual study and review by the time I take the exam. \_\_\_\_\_
2. I understand that I must purchase a study book and bring this to the prep sessions (*Any reputable study book will be fine; we do not suggest one brand over another and recommend that it comes with a supplemental CD*). \_\_\_\_\_
3. I understand that this is a test taking technique program, not a subject review, as a result, it will have little value if I have not done the required study preparation. \_\_\_\_\_
4. I understand that I must attend all sections of this program. \_\_\_\_\_
5. I understand that if I do not come and do not notify you, I am taking the spot another student could have had. \_\_\_\_\_

I have read, understood and initialed the above requirements for this program.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Helpful websites for general information, practice questions and registration for exam:

[www.ets.org](http://www.ets.org)

[www.gre.org](http://www.gre.org)