



## Request for NBME Comprehensive Basic Science Exam (CBSE)

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Date of Birth: Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

Gender: Female  Male

AUSOMA Student ID Number: \_\_\_\_\_

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

Graduation Year: \_\_\_\_\_

When is the student taking the CBSE? \_\_\_\_\_

*(NOTE: Order needs to be placed a minimum of 30 calendar days prior to test date. the minimum testing window is seven days.)*

Location of Testing Center: \_\_\_\_\_

*Prometric Testing Centers: You will use the worldwide network of Prometric testing centers for administration of this exam. When testing at Prometric, examinees will receive a scheduling permit to make an appointment to take the exam at a Prometric Testing Center of your choice.*

**Test Accommodations:** Students with **special needs** may request accommodations from the Registrar's Office at [registrar@ausoma.org](mailto:registrar@ausoma.org).

Do you require extra testing time? Yes      No

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*\*\*\*\*DO NOT WRITE BELOW THIS LINE\*\*\*\*\*

Payment Cleared by Finance Date:

NBME Order Date: