

**Alvernia University**  
**Miller Analogies Test ~ Computer Based Test fact sheet**

- The Miller Analogies Test (MAT) is given on: 9/2/11, 9/30/11, 11/18/11, 12/2/11, 1/6/12, 2/3/12, 3/2/12, 4/13/12, 5/4/12, 6/1/12, 7/6/12 and 8/3/12.
- Only Computer Based Testing is offered. The University supplies the necessary laptop computer and software.
- The testing fee is \$75, payable by money order or certified check only. **The fee is not refundable. We cannot accept personal checks.**
- Seating is very limited. Please consider registering several weeks in advance. Your seat will be reserved when the registration fee is received. The fee and registration form (found below) can be submitted at the Upland Center or mailed to:

Alvernia University  
Attn: Mark Snyder (MAT)  
540 Upland Avenue  
Reading, PA 19611
- When the fee is received, you will receive confirmation that your seat has been reserved.
- The test begins promptly at 2:00 P.M. Test-takers are asked to arrive between 1:30 and 1:45 P.M. to begin the registration process. No one will be admitted to the room after 2:00 P.M.
- Testing takes place in the Upland Center, room 226. Driving directions and a campus map can be found at: [www.alvernia.edu](http://www.alvernia.edu)
- All test takers are required to provide two forms of identification at the time of testing. One form of identification must be a picture ID (driver's license, passport, etc.). The other form of identification can be a credit card, utility bill, membership card, student identification, etc.
- Personal items brought into the test center should be limited to essentials. Access to electronics such as cell phones, PDAs, calculators and similar devices is strictly prohibited. All materials needed to complete the MAT will be provided.
- The test normally concludes between 3:30 and 4:00 P.M.
- Test preparation materials can be found at most area bookstores or libraries.
- Please call Mark Snyder at (610) 796-8296 if you have additional questions.

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**Miller Analogies Test ~ registration form**

**Name:** \_\_\_\_\_

**Phone number:** \_\_\_\_\_

**Phone number (day of testing):** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Money order or certified check #:** \_\_\_\_\_

**Requested testing date:** \_\_\_\_\_