

GET STARTED

In the box to the right, Enter Your Test Sponsor's Name and click the SEARCH button. Click on the resulting test sponsor's name to go to their landing page.



With thousands of testing sites and seats, test takers have a wide choice of dates and locations from which they can select.

To schedule an exam, first tell us the name of the <u>test sponsor</u> - that is, the organization whose exam you wish to take. You can find your test sponsor by typing in the Search box below, or by selecting one of the alphabetized tabs and reading through the list. Then select the name of your <u>test sponsor</u> to get started.

Enhanced Security Check-In





TEST SPONSOR: SCEHS - SAUDI COMMISSION FOR HEALTH SPECIALTIES

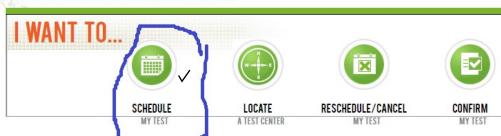




PROMETRIC WORLDWIDE

The most prestigious testin

Frequently Asked Questions



INFORMATION ABOUT THE SCFHS

SCFHS Testing Information - Learn more about the tests offered by Prometric by visiting the SCFHS Web site.

ATTENTION: Licensing Candidates, before proceeding with the booking process please check the 'SCFHS Minimum Qualification List' to ensure you select the correct category of exam tailored to your specialty and ability. The Saudi Commission for Health Specialties (SCFHS) is a scientific body founded by virtue of the Royal Decree No.M/2 dated 06/02/1413H. (Corresponding to 05/08/1992G.), with headquarters located in Riyadh and six branches at Makkah AL Mukarramah area (Jeddah), The Eastern region (Al Khobar and Al Ahsaa), Assir area (Abha), Al Madinah Al Monowarah Area (Al Madinah Al Monowarah) and Al Qasim area (Buraidah). The SCFHS has helped to establish modern, state-of-the-art healthcare institutions and has succeeded in attracting a well-qualified, diversified spectrum of personnel. With these recognized and accredited facilities, the Saudi physician can pursue training in all



الهيئة السعودية للتخصصات الصحية Saudi Commission for Health Specialties

Choose the country in which you would like to schedule your appointment, or the country in which you've already scheduled your appointment, then click Next.

Country: * 🗸 SAUDI ARABIA





NEW APPOINTMENT: INFORMATION REVIEW

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Information Review



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Policy Notice

By clicking the 'I Agree' button, you acknowledge that you understand and agree to the policies set forth by your Testing Program. If you do not understand or agree to the policies set forth by your Testing Program, you may not continue through the scheduling process. Please contact your Testing Program with questions.

Personal Data Privacy Disclosure & Consent

At Prometric, protection of your personal data and information, and making sure you understand how and why it is processed, is of paramount importance to us. As a data processor for your test sponsor, Prometric processes your personal information only for the purposes of registering and scheduling you for a test, administering that test, and processing the results. At no time will your personal information be used by Prometric for any other purpose without your permission. Your personal information, including your test results, will be provided to your test sponsor for the purposes of providing scores, certification, or other benefits to you. The full Prometric Privacy Policy can be found at https://www.prometric.com/en-us/documents/PrometricPrivacyPolicy.pdf.

We may employ other companies and individuals to perform functions on our behalf. Our employees, agents and contractors who have access to personal data and information are required to protect the information in a manner that is consistent with the







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Eligibility Information

Before proceeding, please provide the following information.

Eligibility ID :
First 4 Characters of Last Name :

رقم ال. ويئة أول أربع حروف من أسم العائلة

If you do not know your program identifier, please contact your sponsoring organization.

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To find the closest location(s), please enter a preferred address, city/state, or ZIP/postal code where you would like to schedule your appointment in the search box below.

Address, Neighborhood, City OR Zip/Postal Code
e.g., "1501 Clinton St, Baltimore, MD" or "Paris, France" or "90210"

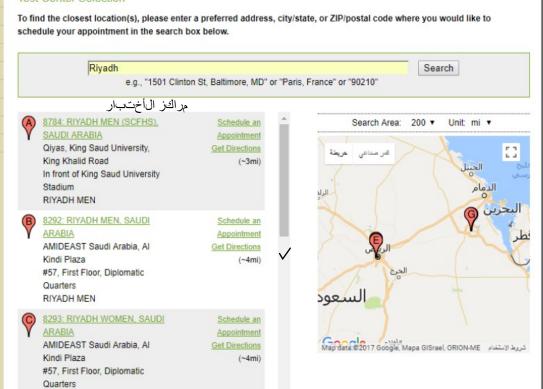
Search Area: 200 V Unit: mi V

كتابة مكان المدينة التي راح يختبر فيه<mark>ا</mark> بالمربع

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Biometric Collection Disclosure

BIOMETRICS

Where selected by your test sponsor and allowed by law, Prometric's Biometric Enabled Check-In System is designed to improve the security and integrity of the testing process in a way that protects test candidate privacy while ensuring test candidate identity. The Biometric Enabled Check-In System converts a fingerprint image to a digital image for the purposes of identity verification, detection and prevention of fraud and misrepresentation, maintaining the integrity of the testing process, and improving the security of test centers. For security purposes, all biometric data is securely transferred to and stored within Prometric's Central Data Center. Prometric manages the security and confidentiality of the data to protect it from unauthorized access, use, disclosure, or alteration, and to retain and destroy the data in accordance with applicable law.

A. Privacy Statement for Biometrics

1. How the Biometric Enabled Check-In System Works

By placing the index finger on a scanner in a Prometric Test Center, the Biometric Enabled Check-In System equipment captures an image of the fingerprint and creates a digitized representation of the fingerprint (a "template"). The fingerprint image and template are paired with other Personal Data provided to Prometric by the candidate (such as name and other identifying information), allowing Prometric to identify the candidate accurately during the testing process and over repeated testing sessions for the same test sponsor.

I agree I do not agree

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The appointment duration is 3-hour(s) and 15-minutes.

Select an available month and click the 'Go' button. When the calendar(s) appear, select an available date and then time.

- Find available seats in a 3 month period.
- Find available seats for a specific day.

December 2017 ▼ Go ✓







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Select an available month and click the 'Go' button. When the calendar(s) appear, select an available date and then time.

- Find available seats in a 3 month period.
- Find available seats for a specific day.



Select an available date

December 2017						January 2018														
S	M	Т	W	Т	F	S	S	M	Т	W	T	F	S	S	M	Т	W	Т	F	S
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10	11	12	13	14	15	16	14	15	16	17	18	19	20	11	12	13	14	15	16	17
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Select an available time



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- Find available seats in a 3 month period.
- Find available seats for a specific day.

December 2017 ▼ Go

Select an available date





If the available dates and times are not suitable to your schedule, please choose a different month and click the 'Go' button or choose another Test Center that may offer more convenient appointment options.

Eligibility Information Appointment Selection Test Center Selection Prometric Biometric Consent Date and Time Selection Payment Appointment Verification Appointment Complete * First (Given) Name: Middle Name: * Street Address Line 1: * Street Address Line 2: * City: * Country: * Country: * State/Province: Postal Code: * Famil Address: * Validate Email: Work/Day Phone: * Home (Evening) Phone: * Date of Birth: Government ID: * Region: * Region: * Facility information Appointment Selection * First (Given) Name: * Middle Name: * Street Address Line 1: * Street Address Line 2: * City: * Country: * State/Province: * Postal Code: * Email Address: * Validate Email: * Work/Day Phone: * Home (Evening) Phone: * Date of Birth: * Government ID: * Region: * Region:	I TIVELY I ONCY INCVIOUS	The name used to schedule you	ur appointment must exactly match the name snowr	t on your identification. At a minimum, the	
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Date and Time Selection Additional Information Payment Appointment Verification Appointment Complete * Last (Family) Name: * Street Address Line 1: Street Address Line 2: * City: * Country: * Country: * Email Address: * Validate Email: Work/Day Phone: * Home (Evening) Phone: * Dav 24 ▼ Month Dec ▼ Year Country: * Government ID Issuing Country: * Government ID: * Region:	Test Center Selection	Before proceeding, please prov	ide the following information.		
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Appointment Complete Street Address Line 2: * City: * Country: * Country: * State/Province: Postal Code: * Email Address: * Validate Email: Work/Day Phone: * Home (Evening) Phone: * Date of Birth: Government ID Issuing Country: * Government ID: * Region:	Appointment Verification				
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Government ID Issuing Country: * Government ID: * Region:		* Home (Evening) Phone:			
Country: * Government ID: * Region:		* Date of Birth:	Day 24 ▼ Month Dec ▼ Year		
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Appointment Complete

Payment

Appointment Name Saudi Licencing Examination -

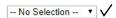
Saudi Nursing Licensing Exam

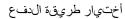
 Price
 239.00 USD

 Balance
 239.00 USD

Required fields are marked with an asterisk (*)

* Payment Options





By clicking 'Next', I authorize Prometric to initiate an electronic authorization to the payment account I've selected in the amount listed above. I understand that this is a one-time authorization and the selected payment account will not be charged until I complete the full transaction by clicking 'Complete Appointment' on the next page.

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To complete your appointment, you must: Eligibility Information Verify your appointment information Appointment Selection Press the "Complete Appointment" button Test Center Selection Prometric Biometric Consent Date and Time Selection Name: Additional Information Saudi Licencing Examination Program Name: Payment Appointment Name(s): Saudi Nursing Licensing Exam Test Center Code/Site **Appointment Verification** Appointment Complete Test Center Address: udi Commision for Health Specialities YADH MEN (SCHS) Test Center Phone #: 0800 Appointment Date: lan 2018 Appointment Time: 5 AM Appointment Duration: ; 23. USD Price: Balance: 239. ISD Payment: **** *-2624 Prometric has a firm commitment ... otecting your privacy. We will not disclose, to third parties, any specific personal identifying information about you without your permission. By clicking the "Complete Appointment" button below, you agree to all terms and conditions related to payments, reschedules, cancellations, refunds and other policies set forth by your sponsoring organization. Complete Appointment

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Appointment Complete ✓

Thank you for scheduling with Prometric.

Please save the information by either printing this page or writing it down.

Your appointment request has been confirmed with the following confirmation number(s):

8870000001627422

Print Confirmation Print Receipt

E-mail Receipt

Name:

Address: Riyadh-

Riyadh SAU

Home (Evening) Phone:

Work/Day Phone:

Program Name: Saudi Licencing Examination
Appointment Name(s): Saudi Nursing Licensing Exam

Test Center Number:

Test Center Address: Saudi Commision for Health Specialities

RIYADH MEN (SCHS)

SAU

Test Center Phone #: 4800800
Appointment Date: 24 Jan 2018
Appointment Time: 11:45 AM
Appointment Duration: 3:15

Price: 239.00 USD Balance: 0.00 USD