NFPT Paper and Pencil Exam Order Form

Fill out each box completely and submit to NFPT at apattee@nfpt.com

Proctor's Shipment Details
(where exam is being mailed)

Name: _____

Company Name: _____ Dept./Title: _____
(if shipping to a business)   *(if shipping to a business)*

Address: _____ City: _____
(Physical address only, not PO Box)

State: _____ Country: _____ Postal Code: _____

Exam Site Details
(where exam is being administered)

☐ Check box if the Exam Site address is the same as the Proctor's Shipment address

Company Name: _____
(if applicable)

Address: _____ City: _____

State: _____ Country: _____ Postal Code: _____

Proctor Contact Details

Cell: (_____) _____

Home: (_____) _____

Work: (_____) _____

Fax: (_____) _____

Email: _____

CPT Exam Request
(Fill Out Completely)

Proctor ID #: _____

Exam Quantity: _____

Exam Date: _____
(24 days' notice required)

Delivered by Date: _____

Exam Candidate: _____
(use page 2 only if testing more than 1 candidate)

Proctor Terms and Agreement

By submitting this order and/or signing below, I hereby acknowledge, understand, affirm and agree to the following, without exception, understand that based on representations made, I am being afforded access to confidential, proprietary and Trade Secret Information and that I will not disclose or provide such information in whole or part to anyone directly or indirectly. Further, I understand that reproducing or copying, or attempting to reproduce or copy any examination (test) material by any means, in whole or in part, is a serious breach of examination security and will be thoroughly investigated by NFPT and reported to the proper Certifying and law enforcement authorities.

I also fully understand and agree that should I fail to adhere to established NFPT policies and procedures, security protocols, etc.; I am and agree to be individually and personally financially responsible for any examination material compromised, as well as any and all other costs associated with such security breach and/or examination content compromise to include, but not limited to, investigation costs, attorney fees, court costs, etc.

Proctor Signature:_____ Date: _____

Order Approved and Submitted By: April Pattee   Date: Same as above

Paper and Pencil Exam Order Form - Candidate List

complete <u>only</u> if testing more than 1 candidate

Proctor's General Information

Proctor Name: _____   Proctor ID#: _____

Candidate Names

Full Name: _____   Full Name: _____

Full Name: _____   Full Name: _____

Full Name: _____   Full Name: _____

Full Name: _____   Full Name: _____

Full Name: _____   Full Name: _____

Full Name: _____   Full Name: _____

Full Name: _____   Full Name: _____

Full Name: _____   Full Name: _____

Full Name: _____   Full Name: _____

Full Name: _____   Full Name: _____

Full Name: _____   Full Name: _____

Full Name: _____   Full Name: _____

Full Name: _____   Full Name: _____