

## **NABCEP Entry Level Exam CANDIDATE ELIGIBILITY FORM**

Please P	RINT all inform	ation clearly.	This form <b>:</b>	must be signed	and filled	out in its entirety.

Ple	lease PRINT all information clearly. This form must be signed and filled ou	it in its entirety.					
Name: In the boxes below enter your name exactly as it appears on your Government Issued Photo ID.							
NOTE: If the name does not match your Photo ID you will not be admitted into the Exam.							
Last Name	First Name	MI					
An E-mail Address is required in order to receive communications from NABCEP about the Entry Level Exam.							
The e-mail will not be used for any other purpose. NOTE: your eligibility cannot be processed without an email.							
E-mail							
Mailing Address: In the boxes below enter the mailing address that should be used to send Passing							
Achievement	t Documents if you pass the Exam.						
Street 1							
G4 4 3							

Street 2						
City		State		Zip		
Check the box next to the format of the Exam that you plan to take: (Note: the Computer Based Testing Exam costs \$95 and Providers can charge up to anPaper & Pencil with my Provider						
additional \$25 administrative fee; Paper and Pencil Exams cost \$75 and Providers can charge up to an additional \$75.) Computer Based with Prometric						
Special Accommodations are available for individuals who can document a physical, mental, or						
learning disability that qualifies under the Americans with Disability Act. Initial the box to the right if						
you plan on requesting special accommodations for the NABCEP Entry Level Exam. A Special						
Accommodation Request form will need to be filled out and submitted to NABCEP along with						
supporting documentation from a qualified professional before any accommodations are granted.						
Release of Scores: NABCEP releases the individual score results to the registered Entry Level Exam						
Provider for all of the candidates that the Provider confers eligibility to. If you would prefer to not have						
your score released to the Provider, you may "opt-out" by initialing the box to the right.						

By signing below I acknowledge that I have received and read the NABCEP Entry Level Exam Candidate Information Sheet and the NABCEP Entry Level Exam Learning Objectives. Furthermore, I acknowledge that I understand that the NABCEP Entry Level Exam is intended to test basic knowledge, that the Entry Level Program is not equivalent to NABCEP Certification, and that passing this exam does not confer or imply any permission or license to work in any field or position.

Signature					Date	
EXAM PROVIDER USE ONLY						
Provider Name				Provider Number		
By the authority invested in me by NABCEP, I confirm that the PV Entry Level Exa					am	
above named candidate completed coursework that qualifies him or						
her to sit for the NABCEP Entry Level Exam on: (Fill in the				Solar Heating & Cooling		
				Entry Level Exam		
Instructor Name		Signature			Date	
<b>IMPORTANT:</b> AFTER A PAPER AND PENCIL EXAM <b>Candidate ID #</b>						
ADMINISTRATION THE "IDENTIFICATION NUMBER" MUST						
BE TRANSFERRED TO THIS FORM FROM THEIR ANSWER						
SHEET IN ORDE	R FOR SCORES TO BE PRO	OCESSED				