



ISO 9001:2015 Certified

INSPECTION • TESTING • CERTIFICATION

Cal/OSHA Excavation Competent Person Examination Request Form

Before You Submit

- **Course requirement:** All applicants must have completed an 8-hour course.
- **Fee and payment:** \$175 per examination. The request must be prepaid.
- **Accepted payment:** Check or money order payable to NITC; Visa, MasterCard, or American Express. Attach payment details or call NITC at (877) 457-6482 to pay by phone.
- **Submission deadline:** Email this form and all completed applications at least three (3) weeks prior to the requested examination date to nitcjourneycerts@nitc.com.
- **Exam delivery:** All examinations are administered by computer.
- **Applicant notification:** The requesting entity is responsible for notifying each applicant of the examination date and time.
- **Policies:** For NITC no-show, cancellation, and refund requirements, see the [Rules and Procedures](#).

Complete electronically or print clearly. Required fields are marked with an asterisk (*).

Requesting Entity and Examination Details

*Examination Location					
*Examination Address					
*City, State, ZIP					
*Contact Person		Phone Number			
*Email Results To					
*Examination Date MM/DD/YYYY		Start Time Include AM or PM		*Number of Examinees	

*Have all applicants completed an 8-hour course?	☐	Yes	☐	No
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Proctor Information

Exam materials will be emailed to the proctor. Complete this section if a proctor has been selected. Leave it blank when asking NITC to locate one.

Proctor Name					
Address					
*City, State, ZIP					
Cell Phone		Email			
Will the proctor waive his/her proctoring fees?	☐	Yes	☐	No	

Submission Checklist

- ☐ Request and examination details are complete.
- ☐ All completed applications are included.
- ☐ Payment is enclosed, card authorization is complete, or payment was made by phone.
- ☐ The applicant roster is complete, including email addresses for results.
- ☐ Proctor information is complete, or NITC has been asked to locate a proctor.

IMPORTANT: Incomplete applications will be rejected.

Please enter all information completely for each applicant. Examinees who do **NOT** have an email address will not be sent their exam results.

Name:		SSN / NITC ID # / UA ID #:	
Address:		City:	State: ZIP:
Email:		Phone #:	Local No. (if applicable)

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