ISO 9001:2015 Certified

INSPECTION • TESTING • CERTIFICATION

High Hazard
Examination Request Form

Before You Submit

- **Fee and payment:** $100 per examinee.
- **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 provide credit card information by phone.
- **Submission deadline:** Email this completed request form at least two (2) weeks prior to the requested examination date to exams@nitc.com.
- **Exam delivery:** All examinations are administered by computer.
- **Applicant notification:** The requesting entity is responsible for notifying each applicant.
- **Proctor:** The Local Union is responsible for providing the proctor.
- **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**	

Payment

Credit Card Authorization - Complete only when card information is provided on this form.

***Total Amount Enclosed**	*Applicant fees + processing fee, if applicable*								$		
Payment Method	☐	Check	☐	Money Order	☐	Visa	☐	MasterCard	☐	American Express	☐ Discover
***Card Number**								***Expiration Date** *MM/YY*			
***CVV2**		*Visa/MasterCard: last 3 digits on back. American Express: 4 digits on front.*									
***Billing Address**								***Billing ZIP Code**			
***Name on Card**								***Cardholder Signature**			

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**	

National Headquarters: 501 Shatto Place, Suite 201, Los Angeles, CA 90020 | (877) 457-6482 | (213) 380-6482 | www.nitc.com

Submission Checklist

☐ Request and examination details are complete.
☐ Payment is enclosed, card authorization is complete, or payment was made by phone.
☐ The applicant roster is complete, including identification information and email addresses for results.
☐ Proctor information is complete.

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:**	
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