

## NWSA PRACTICAL EXAMINER APPLICATION FORM

## Please print and complete all sections.

DDOCDAM:	Tolocommi	inications '	Tawar T	ochnician

	October 26-28, 2021	Windsor, VA	Design Telecom		\$1000
	<u><b>Date</b></u> December 14-16, 2021	<u>Location</u> St. Louis, MO	Host Company ENSA	<u>.</u>	<b>Fees</b> \$1000
1. <i>A</i>	Applicant Information				
First	Name	MI Last Name	2	Suffix	
Comp	pany Name				
Mailir	ng Address				
City_		State	Zip	Country	<u>.</u>
Phone	e		Cell		
E-ma	il				
	: In order to receive essential p				
2. N\	WSA Certification Numbe	r:			
alrea	nse note- to apply to attend dy be certified by NWSA in gived pending certification res	<u>both</u> certification desi			
3. Pa	syment Information				
Credi	t Card No	Ехр	. Date	_ Security Code	
Name	e on Card	Sig	nature	notives somether	nto d
			<i>↑ı yped sıg</i>	natures cannot be accep	этеа

## List two individuals as professional references. 1. \_ Phone Relationship Name 2. Phone Relationship Name 5. Resume Submit a resume along with this application. Applications will not be considered complete without an industry-related resume attached. 6. Cancellation Policy Applicants for NWSA Practical Examiner Accreditation Program workshops shall provide at least one week (five business days) notice prior to the first day of the scheduled workshop, in writing, to cancel their registration. Monies submitted may be applied against a subsequent registration. Alternatively, registrant may request a full refund. Substitutions of qualified applicants are permitted so long as their application has been submitted and approved by NWSA at least 48 hours (2 business days) prior to the start of the workshop. If an applicant fails to provide proper notice to cancel or substitute, or fails to show up for a workshop within 10 minutes of the scheduled commencement time, the applicant will be subject to forfeiture of all fees paid. From time to time, NWSA Practical Examiner workshops may be cancelled or rescheduled because of limited enrollment, equipment issues, or for other reasons. In such cases, NWSA will endeavor to provide you with (but cannot quarantee) at least one week's notice of any changes. Please take this into account when making travel plans. 7. Submission of Application By signing this application to attend a Practical Examiner Workshop, you acknowledge that submission of this application does not guarantee admission into the program. You further understand that your participation in the Practical Examiner Accreditation Program and performance in the workshop activities must meet program expectations in order to receive accreditation, and that failure to meet those expectations or to follow NWSA policies may result in denial, suspension or revocation of any Practical Examiner Accreditation status. Finally, by signing this application, you represent that your statements in this application and those in any required accompanying documentation are true. Signed: \_\_\_\_ \*Typed signatures cannot be accepted Please return, along with supporting documentation, to: pe@nws-a.org FOR NWSA USE ONLY Date Received: By: Application Complete? YES/NO Application Approved? YES/NO By:

4. References

Comments:

Rev0921