

NWSA PRACTICAL EXAM PROCTOR APPLICATION FORM

Please print and complete all sections.

PROGRAM: Telecommunications Tower Technician

<u>Date</u> □ April 18-20, 2023			<u>Host Company</u> Qualtek	<u>Fees</u> \$2500
1. Applicant Information				
First Name	MI	Last Name_		Suffix
Company Name				
Mailing Address				
City		State	Zip	Country
Phone			Cell	
E-mail				
NOTE: In order to receive essent	ial program	updates, this mus	st be your individual (n	ot a shared) email address
2. NWSA Certification Num	nber:			
*Please note- to apply to atte	end a Practi	cal Exam Proct	or Accreditation Prog	ram (PEPAP) workshop, you

*Please note- to apply to attend a Practical Exam Proctor Accreditation Program (PEPAP) workshop, you must already be certified by NWSA in <u>both</u> certification designations (TTT-1 and TTT-2). Spots cannot be reserved pending certification results.

3. Payment Information

NWSA will invoice by email. All fees are subject to CCO's Financial Terms and Conditions.

4. References List two individuals as professions	al references.	
1		
Name	Phone	Relationship
2 Name	Phone	 Relationship
Name	Priorie	Relationship
5. Resume		
Submit a resume along with this industry-related resume attached		not be considered complete without an
6. Cancellation Policy		
week (five business days) notice their registration. Monies submitt registrant may request a full refu application has been submitted a start of the workshop. If an appl	prior to the first day of the so red may be applied against a s nd. Substitutions of qualified nd approved by NWSA at leas icant fails to provide proper n	ram workshops shall provide at least one cheduled workshop, in writing, to cancel subsequent registration. Alternatively, applicants are permitted so long as their st 48 hours (2 business days) prior to the otice to cancel or substitute, or fails to show accement time, the applicant will be subject
imited enrollment, equipment iss	sues, or for other reasons. In	lay be cancelled or rescheduled because of such cases, NWSA will endeavor to provide any changes. Please take this into account
7. Submission of Application		
of this application does not guara participation in the Practical Exan activities must meet program exp expectations or to follow NWSA p	ntee admission into the progra n Proctor Accreditation Progra pectations in order to receive olicies may result in denial, so s. Finally, by signing this app	Workshop, you acknowledge that submission ram. You further understand that your am and performance in the workshop accreditation, and that failure to meet those uspension or revocation of any Practical dication, you represent that your statements cumentation are true.
Signed:*Typed signatures ca	Date:	
*Typed signatures ca	annot be accepted	
Please return, alo	ng with supporting documentat	tion, to: pe@nws-a.org
FOR NWSA USE ONLY		
Date Received:	Ву:	
Application Complete? YES/NO		
Application Approved? YES/NO	Ву:	
Comments:		