



APPLICATION TO WRITE AN ONLINE EXAMINATION

NAME _____

MAILING ADDRESS _____

CONTACT NUMBERS Telephones (Business) (_____) _____

(Mobile) (_____) _____

Email _____

(Address where your username and password will be sent)

ONLINE EXAMINATION I WISH TO WRITE (SELECT ONE): Hydrographic Surveying _____

Professional Examination _____

I UNDERSTAND THAT AFTER ACCEPTING MY APPLICATION YOU WILL SEND ME A USERNAME AND PASSWORD TO ACCESS THE EXAMINATION I HAVE CHOSEN AND I WILL THEN HAVE THIRTY DAYS WITHIN WHICH TO WRITE THE EXAMINATION.

DATE THAT I PREFER TO RECEIVE MY USERNAME AND PASSWORD _____
(YEAR/ MONTH DAY)

THE EXAMINATION WILL BE INVIGILATED BY THE FOLLOWING PERSON:

NAME _____

ADDRESS _____

TELEPHONE NOS. _____

EMAIL _____

THE EXAMINATION WILL BE WRITTEN AT THE FOLLOWING LOCATION:

NAME OF ORGANIZATION _____

ADDRESS _____

TELEPHONE NO. _____

Professional Exam (\$350.00)

Hydrographic Surveying (\$150.00)

Please indicate method of payment:

Cheque enclosed MasterCard Visa

Card Number _____

Expiry Date _____

.....
Signature

.....
Date