

## Acknowledgement of Examination Terms

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I hereby authorize the APENS Chair, APENS Committee, and/or the relevant NCPEID officers, directors, committee members, employees, and agents to review my application for the CAPE certification.

During the online examination, I authorize the proctors to monitor my exam period activities using strategies within their discretion (e.g., web-camera observations, use of LockDown Browser, and other techniques). I acknowledge failure to comply with these requirements before or during the examination may result in closure of the exam. I acknowledge that I will not communicate with others in any way during the examination.

In the case of in-person examinations, I authorize the proctors at my assigned test site to maintain a secure and proper test administration location within their discretion. I acknowledge that in this capacity the proctors may relocate me before or during the examination. I acknowledge that I will not communicate with other examinees in any way during the examination.

If I do anything that is unauthorized or prohibited by the NCPEID in connection with any APENS examination, I understand that my examination performance may be voided, and such activity may be the subject of legal action. In a case where my examination performance is voided, I will not receive a refund of the application fee, nor will I be credited for any future examination.

I understand that the NCPEID reserves the right to refuse administration of the APENS examination if I do not have the proper identification (photo ID), or if in-person exam administration has already begun. If exam administration is refused, I understand I will not receive a refund of the application fee, nor will I be credited for any future examination.

I understand that I may only seek admission to sit for the APENS examination for the purpose of seeking CAPE certification, and for no other purpose. I will not disclose any information regarding the content of the examination, test questions, or test materials.

I understand that the review of the adequacy of examination materials will be limited to computing any scoring correction. I waive all further claims of examination review and agree to indemnify and hold harmless the above designated parties for any action taken pursuant to the rules and standards of the NCPEID with regard to this application and/or the APENS examination.



***By signing, I acknowledge that I have: 1) read and understand the entirety of this CAPE application, 2) provided honest and accurate responses to application questions, and 3) agreed to abide by the terms set forth in this application.***

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Full Name of Applicant

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Applicant's Signature

Date

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**Confidentiality Release (*Signing is optional and is not necessary for certification*):**

I agree that the APENS Committee may release my name and address to individuals and/or organizations for educational and research purposes. By signing this special release, my name and address will be released for mailing lists requested by organizations sponsoring educational programs and conferences or special research studies.

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Full Name of Applicant

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Applicant's Signature

Date