Application for
NITC Journey Level Plumber Certification Examination

Journeyman □ or Apprentice □

☐ I am currently enrolled in an apprenticeship program.
☐ I will be taking this exam at the instruction site upon completion of my course of instruction.
☐ I will be taking this exam at a PSI center. (Provide method of payment below).
☐ I have a minimum of four (4) years experience in the Plumbing Industry or be in the final year of apprenticeship.
☐ I have completed four (4) years in a recognized training program.
☐ I have read the Candidate Information Bulletin for NITC Journey Level Plumber Examination.

First Name __________________________ M.I. __________ Last Name __________________________ SS# (Last Six) __________

Street Address __________________________ City __________________________ State __________________________ Zip __________

Email Address __________________________ Home Phone __________________________ Work Phone __________________________ Cell/Other Phone __________________________

Training Course Location __________________________ Training Course Date __________________________ Name of Instructor __________________________

Local Union # (If Applicable)

List your present or most recent employer first. You must attach documentation for your required four (4) years of experience in the Plumbing Industry or be in the final year of apprenticeship. Acceptable documentation: letters from employers, employment history, certification records, state license(s) and any other employment records. (Phone numbers are required for verification.)

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I do solemnly swear or affirm that the above statements are true. I further realize that falsification of these statements shall be cause for disqualification. By affixing my signature to this application I agree to abide by the following rules and regulations of certification holders as set forth by the NITC Certification Committee. As a holder of an NITC Certification I agree to not make any false claims about the scope of my certification(s); I agree to not utilize an NITC certification in any manner that portrays NITC unfavorably; and furthermore, I agree to not engage in false or misleading advertising of my NITC Certification. I understand that NITC reserves the right to suspend or revoke my certification should I violate these obligations. Should my certification be revoked, I agree to cease and desist any and all references to being the “holder” of an NITC Certification and shall return any certificates, including wallet sized photo identification cards to NITC.

I agree to not utilize any written documents, reports, procedures, etc., with the NITC certification mark in any manner whatsoever that may be inaccurate or false.

I understand and agree that my examination results may be shared with the course instructor, training coordinator or training entity.

Signature of Applicant: __________________________ Date: __________________________

Method of Payment
(**Required Fields for credit card payments**)

*Total Amount Enclosed: $ __________ Check □ Money Order □ Visa □ Master Card □ AMEX □

*Credit Card No: __________ *Expiration Date: __________

* CVV2: _______ Last three or four digits on back of Visa and Master Card, Amex CVV2 on front of card.

*Credit Card “Billing Address”: __________________________ *Credit Card “Billing Address” Zip Code: __________

*Name on Card: __________________________ *Signature: __________________________

As it appear on card (Please Print) __________________________ Signature as shown on credit card __________________________
Information Sheet for
NITC Journey Level Plumber Certification Examination

TO QUALIFY FOR THIS CERTIFICATION candidate must have a minimum of four (4) years experience in the air conditioning and refrigeration industry. Completion of a recognized apprenticeship program or proof of four (4) years experience from employers is required.

A Candidate Information Bulletin has been developed to help ensure your success. Since the information contained in each section of the Bulletin will answer many of the questions you might have, it is required reading prior to proceeding with this application. Download a copy from www.nationalitc.com or call (877) 457-6482 to request a copy.

THE EXAMINATION FEE is One Hundred Thirteen Dollars ($113.00). This must be prepaid. Please make check or money order payable to NITC. Visa, Master Card or American Express are also accepted. The method of payment must be attached at the time of submission; or contact NITC to provide credit card payment information by phone at (877) 457-6482. For NITC No-Show, Reschedule, Cancellation and Refund Policy refer to the Candidate Bulletin.

For re-testing, or those who cannot attend the examination with their instructor, the multiple-choice examination is available computer-based at PSI centers. To locate a PSI center near you visit http://www.nationalitc.com/NITCService.cfm?GO=NEWS&NEWSID=36.

For Individuals requesting to take an examination at a PSI center there will be an additional twenty-five dollar ($25.00) processing fee. These fees vary according to the length of time allowed for the examinations. Please contact our office to confirm what the processing fee will be for your examination.

Exams given at PSI centers require that an email address be provided. You will receive an e-mail confirmation with your login information to schedule the exam date and time. For any examination scheduled at a PSI center, cancellation and rescheduling must be made at least 48 hours prior to the assigned date and time or a rescheduling fee will be assessed.

All electronic devices are prohibited. No PDAs, cellular telephones, or any other types of devices that record or send data are allowed to be used during the examination.

Keep this page for your records. Return Page 1 to NITC via fax (213) 351-7632, e-mail to arcelia@nationalitc.com, or mail to the address shown below. For more information call (877) 457-6482.