

# Application to Proctor RSES EXAMINATIONS



RSES | 1911 Rohwling Road, Suite A | Rolling Meadows, IL 60008-1937 | rses.org

## EXAMS YOU WOULD LIKE TO PROCTOR *(check all that apply)*

*Note: RSES may be in contact with you to secure additional details depending upon the exams selected.*

- EPA Section 608    Low GWP/A2L    Universal R-410A Safety & Training    Heat Pump    Training Courses  
 Technical Institute    Certificate Member    Active Specialized or Certificate Member Specialist

## EXAMS TO BE ADMINISTERED ON BEHALF OF:

- RSES Chapter    School    Company    Other \_\_\_\_\_

## PROCTOR APPLICANT

NAME \_\_\_\_\_ TITLE \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE/PROVINCE \_\_\_\_\_ ZIP/POSTAL CODE \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

PROCTOR EXPERIENCE \_\_\_\_\_

## RSES AFFILIATION

- Individual    Corporate    School Member   RSES MEMBER NO. \_\_\_\_\_ CHAPTER NO. \_\_\_\_\_

## ORGANIZATION

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE/PROVINCE \_\_\_\_\_ ZIP/POSTAL CODE \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

## EXAM BILLING ADDRESS *(if different than above)*   Same as above

CONTACT \_\_\_\_\_ COMPANY \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE/PROVINCE \_\_\_\_\_ ZIP/POSTAL CODE \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

## PROCTOR AGREEMENT

By submitting this proctor application, I am agreeing to abide by all examination administration rules as set forth and by RSES and noted in the RSES Proctor Manual. I agree to keep all exams and exam-related materials secured and in my possession until testing. After testing, I will be responsible for the secure storage and/or destruction of exams. I further understand that no exam material may be reproduced for any reason. I will notify RSES if there are any changes to my contact information (i.e. address, phone number, email, etc.). Upon conclusion of the exam session, I agree to ship all pertinent exams and information the next business day. I further understand that should I fail to uphold any of the examination administration rules, RSES reserves the right to terminate my appointment as a proctor.

SIGNED \_\_\_\_\_ DATE \_\_\_\_\_