

# Certified Public Works Professional - Supervision (CPWP-S) Exam Application

<u>Candidate Information</u>: (Print or type the requested information.)

First Name		MI	Last Name  Job Title	
Employer				
Preferred Address			City	
State/Province		Postal Code	Country	
This is my:	Office	Home		
Demographics	(Optional)			
Gender		Highest Level of Educa	tion	Years in Profession
Exam Date S Certification exa center.		ed by computer either at your	place of employ	ment or at an approved testing
	<b>s</b> . We recommend			are <b>subject to change based on</b> nfirm current availability <b>before</b>
	e technical difficul	ties during your exam, suppor ese hours is not guaranteed.	t is available betw	een <b>8 a.m. and 4:30 p.m. Central</b>
Application To ensure prope preferred exam	er processing and o	coordination, all applications r	nust be submitted	at least 30 days before your
Preferred exam	n date	 Estimate	d exam start time	e (CT)



# **Exam Administration Requirements**

For detailed information, please refer to the complete Exam Administration FAQs available on our website.

To ensure a secure and fair testing environment, the following requirements must be met for certification exam administration:

#### 1. **Distraction-Free Environment**

The exam candidate must have access to a designated computer workstation in a quiet, distraction-free space.

#### 2. Software Installation

The approved proctor must download and install the required web-based testing software **before the exam** 

o Complete download instructions will be provided by APWA.

#### 3. **Proctor Presence**

The designated proctor must be **physically present** during the entire exam session to:

- o Enter required passwords.
- o Monitor the candidate throughout the exam.

## **Proctor Selection Statement**

Your certification exam must be supervised by an **officially approved proctor**. It is your responsibility to identify and secure a qualified individual to serve as your proctor and to submit this completed form for approval.

### **Proctor Requirements**

The individual you select must not have any personal interest in the outcome of your exam. Acceptable proctors may include:

- Human Resources personnel
- Administrative personnel
- A supervisor from another department (not your direct supervisor)

#### The following individuals are not permitted to serve as proctors:

- Relatives
- Co-workers or peers
- Direct supervisors
- Subordinates
- Anyone who may be influenced to violate the exam rules outlined in the Proctor Agreement

I have contacted the individual listed below, who has agreed to act as my proctor for the **CPWP-S Certification Exam**. I certify that the information provided on this form is accurate and complete. I understand that providing false or misleading information may result in disciplinary action by the Certification Commission and may affect my certification status.



# <u>Place of Employment</u> Identify a proctor at your place of employment.

Proctor's Name Proctor's Title

Proctor's Relationship with Candidate Proctor's Phone Number

E-mail Address Location of Exam

# **Testing Center**

- APWA does not have a formal relationship with any testing centers; the candidate can use the <u>National</u> <u>College Testing Association (NCTA) testing center locator</u> to assist in locating a testing center in their area.
- The candidate must identify their preferred testing center on their exam application, and APWA Staff will confirm compatibility with the Questionmark software used to administer APWA certification exams.
- Individual testing centers may have additional fees associated with proctoring the exam. These fees and the scheduling of the exam are the responsibility of the candidate.

Name of Testing Center	Testing Center Phone Number		
Testing Center E-mail	Testing Center Location (Address)		

### Exam Fee Payment: USD 300

#### Credit Card (Visa/MasterCard/American Express)

An invoice will be generated and emailed to you with payment instructions within one to two weeks of receiving your completed application. **To pay by credit card, please call 1-800-848-2792 and have your invoice number ready when you call.** 

### **Check/Money Order (Payable to APWA in US funds)**

Mail check/money order payments to: APWA, Attn. Certification, 1200 Main Street, Suite 1400, Kansas City, MO 64105-2100.