

NABNE

North American Board of Naturopathic Examiners NPLEX PART II - CLINICAL SCIENCE EXAM APPLICATION August 4 - 6, 2010 Examinations

CSE

- G Passed CSE
- G Requested Deferral
- G No-Show/Forfeits Fees

Last Name¹: _____ First Name: _____ M.I.: _____ SSN/SIN: _____
(Print your last name, first name, and middle initial exactly as they appear on your current photo identification)

Mailing address: _____

City: _____ State/Province: _____ Zip/Postal Code: _____

Home phone: _____ Cell phone: _____ E-mail: _____

Naturopathic college (check one): BINM BU CCONM NCCNM NUHS SCNM UBCNM

Date of graduation: ____/____/____ Check here if you do NOT want NPLEX to release your scores to this school.
(mm/yy)

Fill in the single² licensing authority to which 8/10 NPLEX Part II exam results should be sent (e.g., AZ, ON, NA): _____

Test site (check one): AZ BC CT IL* ON OR WA
*Contact NABNE for information regarding additional fees.

Check the Part II - Clinical Science Examination(s) you plan to take and fill in the total fees you are enclosing in the form of CERTIFIED CHECK or MONEY ORDER only:

- App. & Exam Admin. Fee US\$125
- Core Clinical Science Exam Fee US\$500
- Minor Surgery Exam Fee US\$100
- Acupuncture Exam Fee US\$100
- Transcript Fee³ US\$20
- Late Application Fee⁴ US\$100
- Deferred Fees Applied < _____ >
- Total fees enclosed** _____

Incomplete Application Fee⁵ _____
All fees are non-refundable.

Before sending your application materials, be sure to:

- Complete **all** sections of the application.
- Sign and date the application.
- Attach a copy of your current, government-issued photo ID.
- Include a **certified check or money order** for the correct amount in U.S. dollars. NABNE will **not** accept personal checks.
- Include a copy of official documentation to verify a name change made since your last application to take the NPLEX.
- Send all application materials to:

NABNE – Part II Examinations
 Suite 119, #321
 9220 S.W. Barbur Blvd.
 Portland OR 97219-5434

**The postmark deadline for application is:
 May 15, 2010**

By signing and submitting this application form, I certify that the information I have completed on this application is true and correct to the best of my knowledge. Furthermore, I understand and agree to the policies terms and conditions set forth in the NABNE August 2010 Bulletin of Information for the NPLEX Part II - Clinical Science Examinations.

(Applicant Signature)

(Date)

- ¹ If your name has changed since you last applied to take the NPLEX, your application must include a copy of the official documentation that verifies your name change (e.g., marriage license, etc).
- ² Requests to have transcripts sent to additional licensing/regulatory authorities should be made in a separate correspondence, accompanied by the *Transcript Fee* of US\$20, **after** your Part II exam results from the current administration become available.
- ³ You are responsible for requesting that NABNE send a transcript of your NPLEX Part I exam results to the licensing/regulatory authority in the jurisdiction in which you plan to practice. To have a transcript of all previous NPLEX exam results sent to the single licensing/regulatory authority you have filled in above, include the *Transcript Fee* of US\$20 in the total amount you send with your application.
- ⁴ If your application is postmarked May 16-25, 2010 you will be required to submit an additional *Late Application Fee* of US\$100 before your application will be processed.
- ⁵ If the application NABNE receives is incomplete (i.e., if the application is not signed and dated, if it does not include a copy of current government-issued photo identification or the documentation required to verify a name change, or if it does not include the correct fees in U.S. dollars in the form of a certified check or money order), you will be required to submit an additional *Incomplete Application Fee* of US\$100 before your application will be processed.

For Office Use Only

- G Fees Rec'd
- G Photo ID Rec'd
- G Application Entered
- G Passed Part I Examination(s)
- G Cond. Letter of Verification Rec'd
- G Conditional Approval _____
- G Final Letter of Verification Rec'd
- G Final Approval _____

By: _____

INSTRUCTIONS FOR APPLICATION TO TAKE THE NPLEX PART II - CLINICAL SCIENCE EXAMINATIONS

- Complete all sections of the current application** legibly and accurately.
 - # Enter your last name, first name, and middle initial **exactly** as they appear on the copy of the current government-issued photo identification you submit with your application.
 - # Enter your Social Security or Social Insurance Number.
 - # Enter your complete mailing address (including apartment #), city, state/province, zip/postal code, phone numbers, and e-mail address.
 - # Enter the single licensing authority to which the report of your August 2010 exam results should be sent (e.g., AZ, ON). If you do not wish to have a report of your exam results sent to a licensing authority, you should enter "NA".
 - # Check the box next to the naturopathic college from which you have graduated or will be graduating.
 - # Check the box next to the test site at which you plan to take the examination(s).
 - # Check the box next to the examination(s) you plan to take and fill in the total amount of the fees you are enclosing. Be sure to verify that you have added the amounts correctly.
 - # Sign and date the application.

- Include a certified check or money order for the correct amount in U.S. dollars**, made payable to NABNE. NABNE will **not** accept personal checks.
 - Application and Exam Administration Fee:** *(paid with every application to take the NPLEX)* **US\$125**
 - Core Clinical Science Exam Fee:** *(paid with every application to take the Core Clinical Science Examination)* **US\$500**
 - Clinical Elective Minor Surgery Exam Fee:** *(paid with every application to take the Minor Surgery Examination)* **US\$100**
 - Clinical Elective Acupuncture Exam Fee:** *(paid with every application to take the Acupuncture Examination)* **US\$100**
 - Transcript Fee:** *(per transcript of all PREVIOUS NPLEX exam results sent to a single licensing/regulatory authority)* **US\$20**
 - Late Application Fee:** *(paid if the application materials are postmarked May 16-25, 2010)* **US\$100**
 - Incomplete Application Fee:** *(assessed if the application received by NABNE is incomplete)*. **US\$100**

- Attach a copy of your current government-issued photo identification** (e.g., driver's license, government-issued identification card, or passport photo page), regardless of whether you submitted a copy with a previous application.

- Include a copy of the official documentation required to verify a name change** made since your last application to take the NPLEX.

- Make copies of all application materials for your records** (your completed application form, certified check or money order, and your current government-issued photo identification).

- Address your package to:** **NABNE - NPLEX Part II Examinations**
Suite 119, #321
9220 S. W. Barbur Blvd.
Portland, Oregon 97219-5434

- Send your application package via courier** (Express Post, FedEx, Purolator, UPS, etc.) and **keep a postal/courier receipt** for your records.

**The postmark deadline for application to take the
August 2010 NPLEX Part II - Clinical Science Examinations is:**

May 15, 2010

Application materials postmarked May 16-25, 2010
must be accompanied by an additional *Late Application Fee* of US\$100.

Application materials postmarked after May 25, 2010
will not be accepted and will be returned to the applicant.

- Confirm the receipt of your application by checking your *Registration Status* online after June 1, 2010**, at www.nabne.org. NABNE cannot confirm the receipt of application materials by phone, fax, or e-mail.