

NABNE

North American Board of Naturopathic Examiners

NPLEX PART II - CLINICAL SCIENCE EXAM APPLICATION February 8, 9, & 10, 2012 Examinations

CSE

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

Last Name¹: _____ First Name: _____ M.I.: _____ Last 5 digits of SSN/SIN: _____
(Print your last name, first name, and middle initial exactly as they appear on your current government-issued photo identification)

Mailing address: _____

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

Home phone: _____ Mobile phone: _____ E-mail: _____

Naturopathic college (check one): BINM BU CCNM NCNM NUHS SCNM UBCNM

Check here if you do NOT want NPLEX to release your results to this school².

Have you graduated? Yes Graduation date³: ____/____/____
(mm/yy) No Anticipated graduation date: ____/____/____
(mm/yy)

Fill in the SINGLE³ licensing authority to which your 2/12 NPLEX Part II exam results should be sent (e.g., AZ): _____

NABNE Test site location (check one): AZ BC CT IL ON OR WA

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

- App. & Exam Admin. Fee US\$125
- CCS Exam Fee US\$500
- Minor Surgery Exam Fee US\$100
- Acupuncture Exam Fee US\$100
- Transcript Fee⁴ US\$20
- Late Application Fee⁵ US\$100
- Deferred Fees Applied < _____ >

Total fees enclosed _____
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 **cashier's 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 any NPLEX Examination.
- 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:
November 15, 2011

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 February 2012 Bulletin of Information for the NPLEX Part II - Clinical Science Examinations.

(Applicant Signature)

(Date)

¹ If your name has changed since the last time you applied to take any NPLEX Examination, your application must include a copy of the official documentation that verifies your name change (e.g., marriage license, etc).

² If you graduated more than five years ago, you must request that the licensing/regulatory authority in the jurisdiction in which you intend to practice send a letter to NABNE stating that, if you pass the NPLEX Part I and the NPLEX Part II Examinations, you will be considered to have met the NPLEX Examination requirement and that your application for licensure/registration will be accepted. This letter must be received by NABNE within the application postmark period.

³ 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.

⁴ 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.

⁵ If your application is postmarked November 16-25, 2011, you will be required to submit an additional *Late Application Fee* of US\$100 before your application will be processed.

For Office Use Only

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

By: _____

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

- Fill in 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 the last five digits of 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.
 - Check the box next to the naturopathic college from which you have graduated or will be graduating.
 - Enter the **single** licensing/regulatory authority to which the Part I transcript you request on your application and the report of your February 2012 exam results should be sent (e.g., AZ, ON). If you do not wish to have your exam results sent to a licensing/regulatory authority, you should enter "N/A".
 - Check the box next to the test site location at which you plan to take the examination(s).
 - Check the box next to the examination(s) you plan to take and enter the total amount of the fees you are submitting with your application. Be sure to verify that you have added the amounts correctly.
 - Sign and date the application.

- Include a cashier's check or money order, made payable to NABNE, for the correct amount in U.S. dollars.** NABNE will **not** accept personal checks.

- 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 documentation (e.g., marriage license, name change order, etc.) that verifies an official name change** made since the last time you applied to take any NPLEX Examination. The name on the current government-issued photo identification you submit with your application must match the name on this official documentation.

- Make copies of all application materials for your records** (your completed application form, cashier's 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
February 2012 NPLEX Part II - Clinical Science Examinations is:

November 15, 2011

Application materials postmarked November 16-25, 2011
must be accompanied by an additional *Late Application Fee* of US\$100.

Application materials postmarked after November 25, 2011
will not be accepted and will be returned to the applicant.

- After December 1, 2011, confirm the receipt of your application by checking your *Registration Status*** at www.nabne.org. Verify the accuracy of your name, address, test site, and the examination(s) you have applied to take. Contact NABNE immediately if any information is incorrect. NABNE will not confirm the receipt of application materials by phone, fax, or e-mail.