



National Ready Mixed Concrete Association Request for Exam Retake/Recertification

Please send proctor information and exam materials to: (No PO Box Address)

Proctor Name: _____

Proctor Company Name: _____

UPS Shipping Address: _____

City _____ State _____ Zip Code _____

Phone Number _____ Email Address _____

I agree to proctor the exam on: _____
(N/A for Concrete Technologist Level 2, 3 and 4 exams)

Proctor Signature: _____

Person taking the Exam:

Name: _____

Company Name _____

City _____ State _____

Phone Number _____ Email Address _____

Retake Recertification

Check the box on which exam you would like to take:

- | | | |
|--|--|---|
| <input type="checkbox"/> CCSP Module # _____ | <input type="checkbox"/> CDP | <input type="checkbox"/> Concrete Sustainability |
| <input type="checkbox"/> Concrete Technologist Level 2
<i>(must be taken during the course exam date)</i> | <input type="checkbox"/> Concrete Technologist Level 3
<i>(must be taken during the course exam date)</i> | |
| <input type="checkbox"/> Concrete Technologist Level 4
<i>(must be taken during the course exam date)</i> | <input type="checkbox"/> Effective Supervisor | <input type="checkbox"/> Environmental |
| <input type="checkbox"/> Field Testing Technician Grade II | <input type="checkbox"/> Green Building | <input type="checkbox"/> Pervious |
| <input type="checkbox"/> Plant Manager
(exam A and exam B – Fee \$220) | <input type="checkbox"/> Plant Operator
(Exam A) | <input type="checkbox"/> Plant Supervisor
(Exam B) |
| <input type="checkbox"/> Safety | | |

Exam Fee: \$110 per exam

Amount Due \$ _____

I will be paying by: Check American Express Master Card Visa

Credit Card Number: _____ Expiration Date: _____

Name on Credit Card _____

Signature: _____

Please return completed form to Shawnita Dickens, sdickens@nrmca.org