



Exam Results Order Form

National Certification Commission for Acupuncture and Oriental Medicine

Please submit this form to have NCCAOM forward your exam results and/or certification forwarded to State Licensing Board.

Personal Information

Name:		Candidate ID (Optional):	
Address:			
City:	State:	Zip:	
Country:		Postal Code:	
Phone:		Fax:	
Email:		Birth Date:	

Please send this report to (STATE/AGENCY):

Address:		
City:	State:	Zip:

Exam Results/Status Report Fees

<input type="checkbox"/>	Certified Diplomate or Current Applicant for Certification*.....	\$35
<input type="checkbox"/>	Inactive Diplomate	\$75
<input type="checkbox"/>	Lapsed Diplomate	\$100
<input type="checkbox"/>	Non Diplomate**.....	\$150

* An applicant for certification is an individual who has applied for certification and taken an exam but has yet not been certified.

* Individual who have taken an NCCAOM examination administered through a state licensing board for the purposes of Licensure but have never applied for NCCAOM certification:

In order to process your request, you must choose one:

<input type="checkbox"/>	I would like my report sent, even if I am not yet certified.
<input type="checkbox"/>	I would like my report sent after I become certified or I am already a certified Diplomate.

- If you request an addition report you will be required to pay \$35 fee.
- It is your responsibility to contact your state for information on current licensure requirements, including the requirements of your CNT Certificate.
- Please allow 7-10 business days for your request to be processed.

Payment Information (Check One)

<input type="checkbox"/> Check or Money Order <i>*Make check/money order payable to NCCAOM.</i>	<input type="checkbox"/> MasterCard	<input type="checkbox"/> VISA
		Expiration Date:
Name on Card:		

Submit This Form with Payment to:	NCCAOM 76 South Laura Street, Suite 1290 Jacksonville, FL 32202 If paying with Credit Card, you may fax this form to: 904-598-5001
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