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All questions and requests for information about the Heart Failure Certification Examination should be directed to:

AAHFN-CB  
1120 Rt.73 Suite 200  
Mt. Laurel, NJ 08054  
Phone: 888-452-2436  
Fax: 856-439-0525  
Web site: [www.heartfailurecertification.com](http://www.heartfailurecertification.com)

All questions and requests for information about examination scheduling should be directed to:

Applied Measurement Professionals, Inc.  
18000 W 105th Street  
Olathe, KS 66061-7543  
Phone: 913-895-4600  
Fax: 913-895-4650  
Web site: [www.goAMP.com](http://www.goAMP.com)
About AAHFN-CB

Offering basic heart failure certification was initiated by the original AAHFN Board of Directors in 2004 and was a personal goal of the 13 individuals who banded together to facilitate the creation of the AAHFN organization in December 2003. In 2010, the certification examination was developed by the AAHFN-CB (American Association Heart Failure Nurses- Certification Board) under the auspices of AMP (Applied Measurement Professions, Inc.). The first examination was administered in June 2011. The purpose of Heart Failure Nursing Certification is to promote the highest standards of practice within the specialty, to validate attainment of a common knowledge base required for practice, and to encourage and promote continued educational growth.

Independent Testing Agency

AAHFN-CB has contracted with Applied Measurement Professionals, Inc. (AMP) to assist in the development, administration, scoring and analysis of the heart failure certification examination. AMP, located in the greater Kansas City area, is a leading provider of licensing and certification examinations for professional organizations.

Nondiscrimination Policy

The AAHFN-CB and AMP does not discriminate among candidates on the basis of age, gender, race, color, religion, national origin, disability, marital status or any other protected characteristic.

About the AAHFN-CB Examination

The AAHFN-CB examination consists of 100 multiple choice questions, plus 10 questions that are not scored, but are being pre-tested for future use. Candidates will have two hours to complete the exam.

AAHFN Membership Not An Eligibility Requirement

Membership in the American Association of Heart Failure Nurses is not an eligibility requirement for AAHFN-CB Certification programs.

AAHFN– CB Eligibility Criteria

• Hold a current, active RN license within a state or territory of the United States or the professional, legally recognized equivalent in another country and have practiced full time as a registered nurse for at least two (2) years or its equivalent that equates to approximately 4160 hours.

• Have a minimum of 1,200 hours of clinical practice working in a field of nursing caring for heart failure patients within the last two (2) years. Note: this requirement equates to approximately 29% of time in clinical practice of heart failure in the previous 2 years.

• Have completed 30 hrs of continuing education within the last two (2) years, of which a minimum of 15 hours must be focused on care of patients with heart failure. Must be completed at the time the exam application is submitted.

Name and Address Changes

You are responsible for notifying the AAHFN-CB should your name and/or address change at any time before or after you become certified. Failure to do so may result in not receiving information necessary for certification or recertification.

Please notify us of any address or email changes; you may update your profile:
• email: information@aahfn.org,
  OR
• call AAHFN-CB National Office – 1-888-452-2436.

You are responsible for renewing your certification, even if you do not receive a renewal notice.
Examination Fees

<table>
<thead>
<tr>
<th></th>
<th>AAHFN member</th>
<th>Non AAHFN member</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pen &amp; Paper at Annual</td>
<td>$275.00</td>
<td>$375.00</td>
</tr>
<tr>
<td>Meeting</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Computer Based Testing</td>
<td>$350.00</td>
<td>$450.00</td>
</tr>
</tbody>
</table>

This includes a non refundable application fee of $50.00.

Membership in AAHFN must be current through the examination date to be eligible for the reduced fee.

Payment may be made by credit card (VISA, MasterCard or American Express), or check. Registration fees are not refundable or transferrable. The computer based test examination date can be transferred ONCE without additional cost. There will be an increased fee if a pen and paper examination is transferred to a computer based test.

Returned Check Fee $20.00. Any applicant whose personal check is returned for insufficient funds is required to pay this fee. Remittance of fees thereafter must be by certified check or money order. All funds must be drawn on US dollars.

Examination Preparation

Below are just a few of the many resources available to help in your preparation to take the examination.

Heart Failure Nursing Certification – Core Curriculum Review book
The official study guide of the American Association of Heart Failure Nurses. This book is a comprehensive guide for all nurses who provide care to patients with heart failure. Each chapter includes study questions for self-review and resources for further reading.

AAHFN Education Center – www.aahfn.org – has many CE and Non CE activities

Examination content outline - available at www.heartfailurecertification.com, click on the Exam Prep tab, the drop down menu will say “Exam Content Outline”.

Application Process

All applications must be vetted through the AAHFN-CB National Office for approval. Applications may be submitted via online, fax, or mail to the National Office. There will be a $15 hardcopy fee for applications received via fax or mail.

Online: www.heartfailurecertification.com

Fax: 856-439-0525
Attn: AAHFN-CB

Mail to: AAHFN-CB
Certification Exam
1120 Rt.73
Suite 200
Mt.Laurel, NJ 08054

Application for Paper and Pencil Examination

This examination is offered in conjunction with the AAHFN Annual Conference. All applications must be postmarked or time stamped by May 17th of the current year to take the examination; i.e. Annual Conference 2013, applications must be in by May 17, 2013. Applications postmarked or time stamped after May 17th will not be considered.

Application for Computer Based Testing Examination

Applications are to be sent to the AAHFN-CB National Office via online, fax, or mail. Be sure to mark on application that it is for computer based testing. Once your application is approved to sit for the examination, you will be sent a letter of approval with a unique HFN identification number. You will need this number to schedule your examination.
Application Deadlines

Refer to table below for application deadlines and testing dates.

<table>
<thead>
<tr>
<th>Application Window</th>
<th>Testing Window</th>
</tr>
</thead>
<tbody>
<tr>
<td>December 1 - January 31</td>
<td>March 1-31 (Computer Based Testing)</td>
</tr>
<tr>
<td>December 1 – April 30</td>
<td>June - in conjunction with AAHFN Annual Meeting</td>
</tr>
<tr>
<td></td>
<td>(this extended timeframe allows applicants</td>
</tr>
<tr>
<td></td>
<td>sufficient time to submit application, receive</td>
</tr>
<tr>
<td></td>
<td>approval, and to make flight arrangements for</td>
</tr>
<tr>
<td></td>
<td>Annual Meeting and exam.)</td>
</tr>
<tr>
<td>June 1 – July 31</td>
<td>September 1 – 30 (Computer Based Testing)</td>
</tr>
<tr>
<td>September 1 - October 31</td>
<td>December 1—31 (Computer Based Testing)</td>
</tr>
</tbody>
</table>

Examinations are delivered by computer at over 190 AMP Assessment Centers located throughout the United States. The examination is administered by appointment only Monday through Friday at 9:00 a.m. and 1:30 p.m. Saturday appointments may be scheduled based on availability. Available dates will be indicated when scheduling your examination. Candidates are scheduled on a first-come, first-served basis.

Scheduling An Examination

Once you have been approved and received your letter from AAHFN-CB, soon after you will receive an email from AMP that you are able to schedule your exam, there are two ways to schedule your examination.

Online Scheduling: Go to [www.goAMP.com](http://www.goAMP.com) and select “Candidates”; Drop down menu #1 click on “Healthcare”; Drop down menu #2 – click on “American Association of Heart Failure Nurses”; Drop down menu #3 – click on “Certified Heart Failure Examination”. On this page click on “Locate Testing Centers”. You will be directed to a page where you can enter your zip code or click on your state to see location of testing centers. Then follow the instructions for date availability to register for your examination.

OR

Telephone Scheduling: Call AMP at 888-519-9901 to schedule an examination appointment. This toll-free number is answered from 7:00 a.m. to 9:00 p.m. (Central Time) Monday through Thursday, 7:00 a.m. to 7:00 p.m. on Friday, and 8:30 a.m. to 5:00 p.m. on Saturday.

<table>
<thead>
<tr>
<th>If you contact AMP by 3:00 p.m. Central Time on…</th>
<th>Depending on availability, your examination may be scheduled as early as…</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monday</td>
<td>Wednesday</td>
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<tr>
<td>Tuesday</td>
<td>Thursday</td>
</tr>
<tr>
<td>Wednesday</td>
<td>Friday/Saturday</td>
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<tr>
<td>Thursday</td>
<td>Monday</td>
</tr>
<tr>
<td>Friday</td>
<td>Tuesday</td>
</tr>
</tbody>
</table>
When you schedule your examination appointment, be prepared to confirm a location and a preferred date and time for testing. You will be asked to provide your unique HFN identification number. When you call or go online to schedule your examination appointment, you will be notified of the time to report to the Assessment Center and if an e-mail address is provided you will be sent an e-mail confirmation notice.

If special accommodations are being requested, complete the Request for Special Examination Accommodations form included in this handbook and submit it to AMP at least 45 days prior to the desired examination date.

Assessment Center Locations

AMP Assessment Centers have been selected to provide accessibility to the most candidates in all states and major metropolitan areas. A current listing of AMP Assessment Centers, including addresses and driving directions, may be viewed at AMP’s website located at www.goAMP.com. Select “Candidates.” Drop down menu #1 click on “Healthcare”; Drop down menu #2 – click on “American Association of Heart Failure Nurses”; Drop down menu #3 – click on “Certified Heart Failure Examination”. On this page click on “Locate Testing Centers”. You will be directed to a page where you can enter your zip code or click on your state to see location of testing centers.

Holidays

Examinations will not be offered on the following holidays:
New Year’s Day
Martin Luther King Jr. Day
President’s Day
Good Friday
Memorial Day
Independence Day (and July 5)
Labor Day
Columbus Day
Veteran’s Day
Thanksgiving Holiday
Christmas Holiday

New Year’s Eve Day

Special Arrangements for Candidates with Disabilities

AMP complies with the Americans with Disabilities Act and strives to ensure that no individual with a disability as defined by the ADA as a person who has a physical or mental impairment that substantially limits one or more major life activities, a person who has a history or record of such an impairment, or a person who is perceived by others as having such an impairment is deprived of the opportunity to take the examination solely by reason of that disability. AMP will provide reasonable accommodations for candidates with disabilities. Candidates requesting special accommodations must call AMP at 888-519-9901 (certification groups) to schedule their examination.

1. Wheelchair access is available at all established Assessment Centers. Candidates must advise AMP at the time of scheduling that wheelchair access is necessary.

2. Candidates with visual, sensory, physical or learning disabilities that would prevent them from taking the examination under standard conditions may request special accommodations and arrangements and will be reviewed by AMP.

Verification of the disability and a statement of the specific type of assistance needed must be made in writing to AMP at least 45 calendar days prior to your desired examination date by completing the Request for Special Examination Accommodations form. AMP will review the submitted forms and will contact you regarding the decision for accommodations.

Telecommunication Devices for the Deaf

AMP is equipped with Telecommunication Devices for the Deaf (TDD) to assist deaf and hearing-impaired candidates. TDD calling is available 8:30 a.m. to 5:00 p.m. (Central Time) Monday-Friday at 913-895-4637. This TDD phone option is for individuals equipped with compatible TDD machinery.
Rescheduling Or Cancelling An Examination

You may reschedule your computer based test appointment ONCE at no charge by calling AMP at 888-519-9901 at least 2 business days prior to your scheduled computer based test appointment. The following schedule applies.

<table>
<thead>
<tr>
<th>If the Examination is scheduled on . . .</th>
<th>AMP must be contacted by 3:00 p.m. Central Time to reschedule the Examination by the previous . . .</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monday</td>
<td>Wednesday</td>
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<tr>
<td>Tuesday</td>
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<td>Thursday</td>
<td>Monday</td>
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<tr>
<td>Friday</td>
<td>Tuesday</td>
</tr>
</tbody>
</table>

Missed Appointments and Cancellations

You will forfeit your examination registration and all fees paid to take the examination under the following circumstances. A new, complete application and examination fee are required to reapply for examination.

- You wish to reschedule an examination but fail to contact AMP at least two business days prior to the scheduled testing session.
- You wish to reschedule a second time.
- You appear more than 15 minutes late for an examination.
- You fail to report for an examination appointment.

Inclement Weather, Power Failure or Emergency

In the event of inclement weather or unforeseen emergencies on the day of an examination, AMP will determine whether circumstances warrant the cancellation, and subsequent rescheduling, of an examination. The examination will usually not be rescheduled if the Assessment Center personnel are able to open the Assessment Center.

You may visit AMP’s website at www.goAMP.com prior to the examination to determine if AMP has been advised that any Assessment Centers are closed. Every attempt is made to administer the examination as scheduled; however, should an examination be cancelled at an Assessment Center, all scheduled candidates will receive notification following the examination regarding rescheduling or reapplication procedures.

If power to an Assessment Center is temporarily interrupted during an administration, your examination will be restarted. The responses provided up to the point of interruption will be intact, but for security reasons the questions will be scrambled.

Taking the Examination

Pen and Paper Examination

This is examination is given in conjunction with the AAHFN Annual Conference. Dates and time will be determined each year. The following criteria are the same each year. Once you have been approved to take the exam you will receive a letter of approval in the mail.

Approximately 2 weeks prior to the exam session you will receive a confirmation letter by mail from Applied Measurement Professionals, Inc. (AMP), the company administering the exam, that must be presented for admission to the exam session, along with 2 forms of identification. When the letter arrives, please read it carefully to ensure that your name is listed as it appears on your legal identification.
Identification

You MUST bring one of the following: driver’s license with photograph; state identification card with photograph; passport; military identification card with photograph.

The second form of identification must display your name and signature for signature verification (e.g., credit card with signature, social security card with signature, employment/student ID card with signature).

If your name on these documents is different than it appears on your identification, you must bring proof of your name change (e.g., marriage license, divorce decree or court order).

Following is key information that you will find helpful on the day of your exam:

The exam time is 2 hours.

Personal Belongings

We discourage you from bringing personal belongings to the exam. Purses, bags and powered-off electronic devices (e.g., cellular phone, pager, PDA) must be placed in the designated area in the examination room.

Any electronic device that sounds during the exam will result in dismissal from the exam.

Examination Restrictions

Pencils will be provided.

No food or beverages may be carried into the testing room.

If you are a diabetic or have any other special needs, please contact notify the exam proctors upon check-in.

If you need to use the restroom during the exam, you will be escorted by an exam proctor.

Upon completing the examination, you may leave quietly.

Pass/Fail Notification of Examination Results

Examination results will be mailed 4-6 weeks after the exam date. The address that you provide on the application is the address that your test results and certificate will be sent. You are responsible to notify the AAHFN-CB National Office of any changes. If an examination result must be re-sent, there will be a $25 administration fee charged.

Computer Based Examination

Your examination will be given by computer at an AMP Assessment Center. You do not need any computer experience or typing skills to take your examination. On the day of your examination appointment, report to the Assessment Center no later than your scheduled testing time. IF YOU ARRIVE MORE THAN 15 MINUTES AFTER THE SCHEDULED TESTING TIME, YOU WILL NOT BE ADMITTED.

Identification

On the day of your examination appointment, report to the Assessment Center no later than your scheduled testing time. Once you arrive at the location, look for signs indicating AMP Assessment Center check-in. To gain admission to the assessment center, you must present two forms of identification, one with a current photograph. Both forms of identification must be current and include your current name and signature. You will also be required to sign a roster for verification of identity.

- You MUST bring one of the following: driver’s license with photograph; state identification card with photograph; passport; military identification card with photograph.
- The second form of identification must display your name and signature for signature verification (e.g., credit card with signature, social security card with signature, employment/student ID card with signature).
If your name on these documents is different than it appears on your identification, you must bring proof of your name change (e.g., marriage license, divorce decree or court order).

**Security**

AMP administration and security standards are designed to ensure all candidates are provided the same opportunity to demonstrate their abilities. The Assessment Center is continuously monitored by audio and video surveillance equipment for security purposes.

The following security procedures apply during the examination:

- Examinations are proprietary. No cameras, notes, tape recorders, Personal Digital Assistants (PDAs), pagers or cellular phones are allowed in the testing room. Possession of a cellular phone or other electronic devices is strictly prohibited and will result in dismissal from the examination.
- No calculators are allowed.
- No guests, visitors or family members are allowed in the testing room or reception areas.

**Personal Belongings**

No personal items, valuables, or weapons should be brought to the Assessment Center. Only wallets and keys are permitted. Coats must be left outside the testing room. You will be provided a soft locker to store your wallet and/or keys with you in the testing room. You will not have access to these items until after the examination is completed. Please note the following items will not be allowed in the testing room except securely locked in the soft locker.

- watches
- hats

Once you have placed everything into the soft locker, you will be asked to pull out your pockets to ensure they are empty. If all personal items will not fit in the soft locker you will not be able to test. The site will not store any personal belongings. If any personal items are observed in the testing room after the examination is started, you will be dismissed the administration will be forfeited.

**Examination Restrictions**

- Pencils will be provided during check-in.
- You will be provided with one piece of scratch paper at a time to use during the examination, unless noted on the sign-in roster for a particular candidate. You must return the scratch paper to the supervisor at the completion of testing, or you will not receive your score report.
- No documents or notes of any kind may be removed from the Assessment Center.
- No questions concerning the content of the examination may be asked during the examination.
- Eating, drinking or smoking will not be permitted in the Assessment Center.
- You may take a break whenever you wish, but you will not be allowed additional time to make up for time lost during breaks.

**Practice Examination**

After your identification has been confirmed, you will be directed to a testing carrel. You will be instructed on-screen to enter your HFN identification number. You will take your photograph which will remain on screen throughout your examination session. This photograph will also print on your score report. Prior to attempting the examination, you will be given the
opportunity to practice taking an examination on the computer. The time you use for this practice examination is NOT counted as part of your examination time or score.

When you are comfortable with the computer testing process, you may quit the practice session and begin the timed examination.

If you wish to see and practice navigating within the computer-based testing environment before your examination date, a free online computer-based testing tutorial is available. Go to the LXR Store at http://store.lxr.com and follow the instructions to access a Sample Web Test.

**Timed Examination**

Following the practice examination, you will begin the timed examination. Before beginning, instructions for taking the examination are provided on-screen.

The computer monitors the time you spend on the examination. The examination will terminate if you exceed the time allowed. You may click on the “Time” box in the lower menu bar on the screen or select the Time key to monitor your time. A digital clock indicates the time remaining for you to complete the examination. The Time feature may be turned off during the examination.

Only one examination question is presented at a time. The question number appears in the lower right of the screen. Choices of answers to the examination question are identified as A, B, C, or D. You must indicate your choice by either typing in the letter in the response box in the lower left portion of the computer screen or clicking on the option using the mouse. To change your answer, enter a different option by pressing the A, B, C, or D key or by clicking on the option using the mouse. You may change your answer as many times as you wish during the examination time limit.

To move to the next question, click on the forward arrow (>) in the lower right portion of the screen or select the NEXT key. This action will move you forward through the examination question by question. If you wish to review any question or questions, click the backward arrow (<) or use the left arrow key to move backward through the examination.

An examination question may be left unanswered for return later in the examination session. Questions may also be bookmarked for later review by clicking in the blank square to the right of the Time button. Click on the hand icon or select the NEXT key to advance to the next unanswered or bookmarked question on the examination. To identify all unanswered and bookmarked questions, repeatedly click on the hand icon or press the NEXT key. When the examination is completed, the number of examination questions answered is reported. If not all questions have been answered and there is time remaining, return to the examination and answer those questions. Be sure to provide an answer for each examination question before ending the examination. There is no penalty for guessing.

**Candidate Comments**

During the examination, comments may be provided for any question by clicking on the button displaying an exclamation point (!) to the left of the Time button. This opens a dialogue box where comments may be entered. Comments will be reviewed, but individual responses will not be provided.
Following the Examination

After completing the examination, you are asked to complete a short evaluation of your examination experience. Then, you are instructed to report to the examination proctor to receive an examination completion report.

Scores Cancelled by the AAHFN-CB or AMP

AMP is responsible for the validity and integrity of the scores they report. On occasion, occurrences, such as computer malfunction or misconduct by a candidate, may cause a score to be suspect. AAHFN-CB and AMP reserve the right to void or withhold examination results if, upon investigation, violation of its regulations is discovered.

All Examination Candidates

Failing to Report For An Examination

If you fail to report for an examination, you will forfeit the registration and all fees paid to take the examination. A completed application form and examination fee are required to reapply for examination.

Misconduct

If you engage in any of the following conduct during the examination you may be dismissed, your scores will not be reported and examination fees will not be refunded. Examples of misconduct are when you:

• create a disturbance, are abusive, or otherwise uncooperative;
• display and/or use electronic communications equipment such as pagers, cellular phones, PDAs;
• talk or participate in conversation with other examination candidates;
• give or receive help or are suspected of doing so;
• leave the Assessment Center during the administration;
• attempt to record examination questions or make notes;
• attempt to take the examination for someone else;
• are observed with personal belongings, or
• are observed with notes, books or other aids without it being noted on the roster.

Copyrighted Examination Questions

All examination questions are the copyrighted property of AAHFN-CB. It is forbidden under federal copyright law to copy, reproduce, record, distribute or display these examination questions by any means, in whole or in part. Doing so may subject you to severe civil and criminal penalties.

Confidentiality

Information about candidates for testing and their examination results are considered confidential. Studies and reports concerning candidates will contain no information identifiable with any candidate, unless authorized by the candidate.

Duplicate Score Report

You may purchase additional copies of your results at a cost of $25 per copy. Requests must be submitted to AMP, in writing. The request must include your name, HFN identification number, mailing address, telephone number, date of examination and examination taken. Submit this information with the required fee payable to AMP in the form of a money order or cashier’s check. Duplicate score reports will be mailed within approximately two weeks after receipt of the request and fee. Requests must be submitted within one year of your examination to be processed.
After the Examination

If You Pass The Examination:

Each successful candidate will be sent an 8 ½” x 11” certificate, with the ability to log-on to the AAHFN-CB website to print a wallet size certification card. In addition, the candidate will be able to use the designation “CHFN.” A certification pin is available for purchase on the heart failure certification website: www.heartfailurecertification.com. Names of successful candidates will be published in the AAHFN’s quarterly newsletter The Connection, in the Heart & Lung Journal, and on the certification website.

If You Do Not Pass The Examination:

A candidate who does not pass the examination is able to re-take the exam in two months, but must re-take the exam within six (6) months of original test date to receive the examination at a reduced fee. The reduced rate is $125 for AAHFN members and $200 for non-members. This includes a non-refundable application fee of $50.00. A candidate who does not pass the second examination is considered failed. Any repeat examination will require completion of a new application and payment of the full examination fee.
REQUEST FOR SPECIAL EXAMINATION ACCOMMODATIONS

If you have a disability covered by the Americans with Disabilities Act, please complete this form and the Documentation of Disability-Related Needs on the reverse side so your accommodations for testing can be processed efficiently. The information you provide and any documentation regarding your disability and your need for accommodation in testing will be treated with strict confidentiality.

Candidate Information

<table>
<thead>
<tr>
<th>Candidate ID #</th>
<th>Requested Assessment Center:</th>
</tr>
</thead>
</table>

Name (Last, First, Middle Initial, Former Name)

Mailing Address

City

State

Zip Code

Daytime Telephone Number

<table>
<thead>
<tr>
<th>Special Accommodations</th>
</tr>
</thead>
<tbody>
<tr>
<td>I request special accommodations for the __________________________ examination.</td>
</tr>
</tbody>
</table>

Please provide (check all that apply):

- Reader
- Extended testing time (time and a half)
- Reduced distraction environment
- Please specify below if other special accommodations are needed.

Comments:

PLEASE READ AND SIGN:

I give my permission for my diagnosing professional to discuss with AMP staff my records and history as they relate to the requested accommodation.

Signature: __________________________ Date: __________________________

Return this form with your examination application and fee to:
Examination Services, AMP, 18000 W. 105th Street, Olathe, KS 66061-7543.
If you have questions, call the Candidate Support Center at 888/519-9901.

Rev. 9/28/20111
Please have this section completed by an appropriate professional (education professional, physician, psychologist, psychiatrist) to ensure that AMP is able to provide the required accommodations.

Professional Documentation

I have known ________________________________ since _____ / _____ / ______ in my capacity as a

Candidate Name

Date

My Professional Title

The candidate discussed with me the nature of the test to be administered. It is my opinion that, because of this candidate's disability described below, he/she should be accommodated by providing the special arrangements listed on the reverse side.

Description of Disability: ____________________________________________________________

__________________________________________________________

__________________________________________________________

__________________________________________________________

__________________________________________________________

Signed: ________________________________ Title: ________________________________

Printed Name: ________________________________

Address: __________________________________________________________

__________________________________________________________

Telephone Number: ________________________________ E-mail Address: ______________

Date: ________________________________ License # (if applicable): __________________

Return this form with your examination application and fee to:
Examination Services, AMP, 18000 W. 105th Street, Olathe, KS 66061-7543.
If you have questions, call the Candidate Support Center at 888/519-9901.