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| **INCOSE Knowledge Exam Request*****All paper exam details must be finalized at least two weeks prior to the exam date.*** |
| **Hosting Chapter or Organization** |  |
| **Point of Contact** | Name: |
| Email: |
| **Approved Proctor***Proctors for INCOSE Knowledge exams must be an ESEP who will not teach any test prep courses for two years after serving as a proctor. Professional and volunteer test preparation providers should not serve as proctors.* | Name:  |
| Email: |
| **Approved back up proctor or assistant** | Name: |
| Email:  |
| **Event Title if not Chapter** |  |
| **Description (brief description of event and exam):**  |  |
| **Date(s):** |  |
| **Start time:** *Please include Time Zone* |  |
| **Shipping Address for Exam Materials***(If located in the US, please send address for nearest FedEx)* | Address 1: |  |
| Address 2: |  |
| City: |  |
| State/Province: |  |
| Postal Code: |  |
| Country: |  |
| **Exam Location/Venue**  | Address 1: |  |
| Address 2: |  |
| City: |  |
| State/Province: |  |
| Postal Code: |  |
| Country: |  |
| **Anticipated # of participants:** |  |
| **Max.# participants (30 per room is the maximum allowed per proctor, per exam):** |  |
| **Date to close registration:***Registration through INCOSE Central database is now required. Please do not use a third-party resource to host registration.*  |  |