

# CTC/CTM Enrollment Form



## Personal Information

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Company: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Business Email: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Please enroll me for the  CTC Designation  CTM Designation

CTC Workbook: \$85.00  National Occupational Standards PDF: \$9.99

National Occupational Standards Printed Copy: \$45.00

## Exam Information

Exam Location:  Business Address  Proctor's Address  Other

Exam Date: \_\_\_\_\_ Exam Time: \_\_\_\_\_ To Be Advised: \_\_\_\_\_

Note: We recommend hosting the online exam before 2:00 pm PT in case you run into technical problems.

If you choose not to enter an Exam Date and Time you will have up to one year to complete your exam. After that date, your registration will be cancelled. Please email ACTA at [certification@acta.ca](mailto:certification@acta.ca) with your chosen exam date.



## Proctor Information

Please note that the exam is only available online.

You will need a Proctor to write the exam. Please see our Proctored Venues list by clicking here: <http://www.acta.ca/bc-proctored-venues>

A) You may write at one of the proctored venues where a computer and proctor is made available to you, usually for a cost of \$40.00 paid directly to the proctored venue (this arrangement does not involve ACTA). Once you have confirmed your arrangement to write at a proctored venue, please fill out the information below. **OR**

B) You may choose your own Proctor and make whatever financial arrangements are required (this arrangement does not involve ACTA). If you choose to find your own Proctor, please complete the information below.

Name: \_\_\_\_\_ Position: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Email: \_\_\_\_\_ Telephone: \_\_\_\_\_

## Payment Information

Cardholder Name: \_\_\_\_\_

Card Number: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

Amount: \_\_\_\_\_

## Terms and Conditions:

This registration form must be accompanied by the appropriate fee made payable to ACTA and be submitted at least 10 days before the exam date. A late registration fee applies to all applications received within 10 days of proposed exam date. Applicable taxes and shipping cost are extra.

I have read the registration information on this form and accept the terms and conditions described.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*If you choose not to print and sign this form, your full name typed above will be considered a valid signature.*