Instructor & Performance Evaluator Registration Form

PLEASE PRINT

- Full ICTP class October 16 & 17 7:00am-5:30pm
- ICTP for Performance Evaluators October 16th (half a day class) 7:00am-1:00pm
- Location: 2950 East X Street, La Porte TX 77571---CMEF Office
- Registration Deadline: October 9th
- Instructor $200.00; Performance Evaluator $80.00

NAME _____
LAST FIRST MI

HOME ADDRESS _____
STREET, P.O. BOX CITY STATE ZIP

HOME PHONE (____) _____ WORK PHONE (____) _____

EMPLOYER _____

EMPLOYER ADDRESS _____
STREET CITY STATE ZIP

To be eligible the candidate must:

1. Be approved by the Administrator of Accredited Assessment Center, **AND**
2. Have journey level experience in the craft to be evaluated, **AND**
3. **One** of the following:
   a. **PASS** the NCCER Craft Assessment in their craft area, **OR**
   b. Successfully complete the Contren Curriculum Modules in their craft, or taught that module

*****Verification of eligibility will be required for each craft*****

Please indicate the craft in which you will be certified.
1._____ **2.**_____ **3.**_____

Social Security number_____/____/_____

I am registering for the **Instructor** or **Performance Evaluator** (please circle one)
(The PE class will cover modules 1,6,9)

CANDIDATE SIGNATURE _____

PAYMENT METHOD: ☐ Check Enclosed

☐ Credit Card _____ _____Exp.Date
☐ Visa ☐MC ☐AMEX
Address associated with Credit Card. _____

_____

*** ☐ Invoice the employer listed above (ABC Members Only)
P. O. NUMBER _____

***Employers requesting an invoice must be approved by CMEF.