

Certification Retesting Application

Note: this application is only for retesting. Submit three weeks prior to preferred exam date. Please complete the following information and submit with applicable payment information:

Mr. Ms. Last Name: _____ Legal First Name: _____ Middle Initial: _____

Title: _____ Company: _____

Business Residence Address: _____

City: _____ State: _____ Zip: _____

Office Mobile Phone: _____ Fax: _____

Primary E-mail: _____ Secondary E-Mail: _____

Certification Type: _____ I have registered for the seminar: YES NO

Seminar Date and Location (if applicable): _____

Choose who you will be testing with:

- AEE Scheduled Event - \$100.00
- AEE Scheduled Event/Reinstate - \$400
- Remote Testing Center - \$150
- Remote Testing Center/Reinstate - \$400
- AEE Scheduled Event CMVP - \$200.00
- AEE Scheduled Event/Reinstate CMVP - \$400
- Remote Testing Center CMVP - \$300
- Remote Testing Center/Reinstate CMVP - \$500

Method of Payment: Visa MasterCard American Express Discover Check

Card Number: _____ CVV: _____

Expiration Date: _____ Name on Card: _____

Billing Address: _____

City: _____ State: _____ Zip Code: _____

Check Number: _____

I certify that the information I have provided is correct and agree to indemnify and hold harmless the Association of Energy Engineers (AEE), its contractors, the Certification Board, and those affiliated with AEE and its programs.

Signature: _____ Date: _____

Mail, Fax, or Email application to the appropriate AEE Certification Department

3168 Mercer University Drive / Atlanta, GA 30341 / Fax: 770- 447-4354

CEM, EMIT, BEP – Helen@aeecenter.org

CMVP, BEST, GOHP, EEP, PCF – Mzakin@aeecenter.org

CEA, CEAIT, CBCP, All others - FSeskin@aeecenter.org