



Entomological Society of America

Certification Exam Re-Test Form

admin@entocert.org

Re-Examination Application

This form is designed to be used by applicants who need to retake an exam. Please fill in the information below and remit to the address shown *no less than two weeks prior* to your anticipated examination date.

Your name: _____

Your email: _____

Exam date: _____

Exam proctor (name)*: _____

Exam proctor (email)*: _____

Exam proctor (phone)*: _____

Submission Details:

Retesting Fee (*The retest fee is \$50 for ESA members, if you are an ESA member adjust the price. If you indicate the member price and are not a member, you will be charged the non-member rate*)

\$ _____ 75

Total:

\$ _____

Please remit to:

Entomological Society of America

3 Park Place

Suite 307

Annapolis, MD 21401

admin@entocert.org; Call: 301-731-4535, x3026

VISA, MASTERCARD, AMERICAN EXPRESS, or DISCOVER ONLY, PLEASE:

CC Info (number): _____

CC Exp date: _____

CC Name: _____

CC Signature: _____

If paying by check, indicate check number here: _____

* The first choice for a proctor is always a BCE or an ACE. If neither is available, then an ESA member or a person of high community standing can work, but must be approved prior to the exam.