#  NATIONAL KNOWLEDGE EXAM® (PEI)

 **REGISTRATION FORM**

 Please complete and email, fax, or send to us by post.

**CHARTERED PROFESSIONAL IN HUMAN RESOURCES - NATIONAL KNOWLEDGE EXAM**

The National Knowledge Exam® (NKE) assesses your understanding of HR knowledge and skills. After you have passed the exam, you are considered a candidate for certification.

**Registration Deadline: March 25th 2020 / Exam Date: May 29th 2020 / Exam Fee: $525+HST**

**Completing this registration form confirms your application to write the May 29th 2020 NKE® exam.**

**REGISTRANT DETAILS**

Title: Mr.  Mrs.  Ms.  Dr. Other:

First Name: Job Title: Phone Number:

Business/Work Address:

Last Name: Organization: Email:

Language preference for NKE: English \_\_\_\_ French \_\_\_\_

Special Accommodations If you require any special accommodations as it pertains to writing the NKE, please provide a description below:

**EDUCATIONAL REQUIREMENT (if applicable for pathway)**

Name of Educational Institution: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title of Bachelor Degree Obtained: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Year of Completion: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Registrant Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 *I attest that my education credentials are valid and complete.*

**PAYMENT DETAILS**

**PAYMENT BY CREDIT** – Please use this form to pay by or

Cardholders Name (as it appears on the card)

Billing Address:

Card Number Expiry Date

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CVV Number {last 3 digits on back of credit card}

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Cardholder Signature

*Your signature on this form authorizes us to charge the current fees to your card.*

**REQUEST PAYMENT BY INVOICE INSTEAD** *(Check if applicable only) Note: Payment must be received by registration deadline.*

**RETURNING THE FORM**

Send the form by email to: **main@cphrpei.ca**

Or by post to: **CPHR PEI,** 101 Kent Street PO Box 2151 Charlottetown, Prince Edward Island C1A 8B9