

## ServSafe® Examination Request Form & Agreement

- ☐ I (proctor name printed) \_\_\_\_\_ acknowledge that I have read, understand, and have been trained to follow the examination policies and procedures in the National Restaurant Association Exam Administration Handbook. I will be accountable for performing within these guidelines. I understand that Exam Request Forms will not be processed without both pages of this document signed and completed.
- ☐ I will comply with procedures for handling any breaches of security that might occur and will not reveal the content of the examination, answers to examination questions, or administer the examination to anyone with a conflict of interest.

I have confirmed that the physical exam facility meets the following minimum requirements:

- ☐ **Permits all examinees to perform to their highest level of ability.**
- ☐ **Adheres to fire, safety, building (including codes regarding smoking), and occupancy codes and laws in the local jurisdiction.**
- ☐ **Meets all state and/or local regulatory requirements for exam administration.**
- ☐ **Offers adequate lighting, heating, cooling, ventilation, writing surfaces, and seating.**
- ☐ **Acoustics allow examinees to hear instructions.**
- ☐ **Allows efficient spacing between each examinee in actual testing area, or other appropriate and effective methods to prevent any examinee from viewing another's responses.**
- ☐ **Offers ability to monitor the examinees and the exam booklets at all times.**
- ☐ **Accessible for examinees with disabilities (e.g., wheelchair accessibility).**
- ☐ **Location is private to proctor and examinees only during exam administration.**
- ☐ **Online exam only: A computer with Internet access, mouse, and keyboard is available for each examinee. Not required but recommended is a printer connection for providing printed pass/fail information upon exam completion.**

I understand if my location does not meet any of these standards that I should not administer the exam at this locale. The National Restaurant Association reserves the right to require documentation of the exam location (i.e. digital photograph) before or after exam administration. I understand that answer sheets may not be processed (or initial requests approved) if I'm unable to provide documentation. I understand the National Restaurant Association conducts announced and unannounced audits of ServSafe exam administrations. Any allegation or violation of any guidelines in the *Exam Administration Handbook* can lead to investigation, suspension, and/or revocation of instructor/proctor status or examinee results/certification.

Signature of Proctor \_\_\_\_\_

Date \_\_\_\_\_

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The most current version of this form is available at ServSafe.com.

Please verify you are using the current request form prior to submitting your request. Last revised, April 2015.

## PLEASE PRINT CLEARLY

- To order examinations, you must be a registered proctor. Please complete this form and email to ServiceCenter@restaurant.org or fax to 866.665.9570. If faxing, please text or call the Service Center at 800.765.2122, to verify that it has been received. *Please do not mail your request after emailing or faxing it!*
- Examinations may be ordered through ServSafe.com up to four business days prior to the examination date by going to the Instructor/Proctor tab, then clicking "Schedule Exam Sessions." A user ID and password are required.
- The Instructor Resource Center contains all forms and applications needed.

## Section 1—Class Information

|                                                         |                   |                                                                                 |     |
|---------------------------------------------------------|-------------------|---------------------------------------------------------------------------------|-----|
| Date request sent to the Association                    | Organization name | (If franchisee, provide parent company)                                         |     |
| Organization address                                    |                   |                                                                                 |     |
| Exam date/time                                          |                   | Location of examination administration site (e.g., state, province, or country) |     |
| Proctor name and identification number (required field) |                   | Contact name (if different from instructor/proctor)                             |     |
| Email                                                   |                   | Email                                                                           |     |
| Work telephone                                          | Fax               | Work telephone                                                                  | Fax |
| Home telephone                                          |                   | Home telephone                                                                  |     |

## Section 2—Shipping Address and Person for Examinations

Shipping is free when examinations are ordered nine business days or earlier from the exam date. Any orders placed eight business days or less from the exam date require a credit card for the cost of shipping. The National Restaurant Association ships via UPS and a signature is required for delivery. Note: Business days refer to Monday–Friday and do not include any federal holidays. Orders shipped UPS Next Day or 2nd Day Air may not be delivered until 7:00 p.m.

|                                                        |
|--------------------------------------------------------|
| Name                                                   |
| Mailing address (no P.O. boxes, APO, AE, etc.)/suite # |
| City/state/zip code                                    |
| Telephone                                              |

## Section 3—Billing Information

Only needs to be submitted if submitting within eight business days of the exam date.

|                                                        |               |                        |           |
|--------------------------------------------------------|---------------|------------------------|-----------|
| Credit card number                                     | Security code | Type of credit card    | Exp. date |
| Name on credit card (please print)                     |               | Cardholder's signature |           |
| Billing address (no P.O. boxes, APO, AE, etc.)/suite # |               |                        |           |
| City/state/zip code                                    |               |                        |           |

To ensure your rush order is processed, your billing address must match the address associated with the credit card.

## Section 4—Examination Request

Please indicate the language and number of **ServSafe examinations** you need (foreign language examinations are bilingual):

|                                           |                                         |                                            |                                                |
|-------------------------------------------|-----------------------------------------|--------------------------------------------|------------------------------------------------|
| <input type="checkbox"/> English _____    | <input type="checkbox"/> Spanish _____  | <input type="checkbox"/> Korean _____      | <input type="checkbox"/> Chinese _____         |
| <input type="checkbox"/> Instructor _____ | <input type="checkbox"/> Japanese _____ | <input type="checkbox"/> Large Print _____ | <input type="checkbox"/> French Canadian _____ |

**Reminder: Examination Answer Sheets do not accompany the exam booklets. Examination Answer Sheets or textbooks with Examination Answer Sheets must be purchased prior to testing by ordering on ServSafe.com or contacting the Service Center at 800.765.2122. All examinees must have Examination Answer Sheets.**