



Candidate Recertification Application

WRITTEN (PAPER/PENCIL TESTS) & PRACTICAL EXAMINATIONS—RIGGER & SIGNALPERSON

Please type or print neatly.

FULL LEGAL NAME		First	Middle	Last	Suffix (Jr., Sr., III)
(as shown on driver's license)					
CCO CERTIFICATION NUMBER (if previously certified)		DATE OF BIRTH		CANDIDATE ID: (if previously tested)	
MAILING ADDRESS					
CITY				STATE	ZIP
PHONE	CELL	FAX		EMAIL	
COMPANY/ORGANIZATION				PHONE	
COMPANY MAILING ADDRESS					
CITY				STATE	ZIP
<input type="checkbox"/> I AM REQUESTING TESTING ACCOMMODATIONS IN COMPLIANCE WITH THE AMERICANS WITH DISABILITIES ACT (ADA). <i>(For details on NCCCO's Testing Accommodations policy, please see www.nccco.org/accommodations.)</i>					
WRITTEN TEST ADMINISTRATION # (contact Test Site Coordinator)			DATE YOU INTEND TO TEST (MM/DD/YYYY)		TEST SITE COORDINATOR

Note: Written Exam applications received without a Written Test Administration Number will be marked incomplete and cannot be processed.

FILL IN the circles next to the exam(s) for which you are applying.

EXAM DESCRIPTION	INITIAL EXAM FEES	RETEST FEES
Recertification Exams—Signalperson and/or Rigger certified only (includes card):		
<input type="radio"/> Rigger Level I Recertification Written Exam (652851)	<input type="radio"/> One Exam \$95	<input type="radio"/> One Exam \$95
<input type="radio"/> Rigger Level II Recertification Written Exam (652833)	<input type="radio"/> Two Exams \$190	<input type="radio"/> Two Exams \$190
<input type="radio"/> Signalperson Recertification Practical Exam (777702)		
Recertification Exams—current CCO-certified crane operators (includes card):		
<input type="radio"/> Rigger Level I Recertification Written Exam (652851)	<input type="radio"/> One Exam \$75	<input type="radio"/> One Exam \$50
<input type="radio"/> Rigger Level II Recertification Written Exam (652833)	<input type="radio"/> Two Exams* \$125	<input type="radio"/> Two Exams \$100
<input type="radio"/> Signalperson Recertification Practical Exam (777702)		
Note: Individuals recertifying for Rigger Level II are NOT required to take the Rigger Level I recertification exam.		
Additional Exams (new certifications)*:		
<input type="radio"/> Rigger Level I Written Exam (652850)	<input type="radio"/> One Exam \$50	<input type="radio"/> One Exam \$50
<input type="radio"/> Rigger Level I Practical Exam	<input type="radio"/> Two Exams \$100	<input type="radio"/> Two Exams \$100
<input type="radio"/> Rigger Level II Written Exam (652802)	<input type="radio"/> Three Exams \$150	<input type="radio"/> Three Exams \$150
<input type="radio"/> Rigger Level II Practical Exam	<input type="radio"/> Four Exams \$200	<input type="radio"/> Four Exams \$200
<input type="radio"/> Signalperson Written Exam (652701)		
<input type="radio"/> Signalperson Practical Exam		
Other fees:		
<input type="radio"/> Updated/Replacement CCO Card		\$25
<input type="radio"/> Candidate Late Fee		\$50
<input type="radio"/> Incomplete Application Fee (see Candidate Handbook for details)		\$30
TOTAL AMOUNT ENCLOSED		\$ <input style="width: 100px;" type="text"/>

***To receive discounted pricing, all written exams must be taken at the same test administration and all practical exams must be completed within seven days of the written exam date. For logistical reasons it is recommended that candidates take no more than four exams on the same day.**

CANDIDATE RECERTIFICATION APPLICATION (CONT'D)




RIGGER & SIGNALPERSON

I declare that the foregoing statements and those in any required accompanying documentation are true. I understand and agree that my failure to provide accurate and complete information or abide by NCCCO's policies and procedures, including the Code of Ethics and Substance Abuse Policy, shall constitute grounds for the rejection of my application or denial or revocation of my certification. I understand that NCCCO reserves the right to verify any information in this application or in connection with my certification. I consent to NCCCO's release of any information regarding this application and my examination administration to third parties, consistent with NCCCO's Information Release Policy. I have received a copy of the NCCCO Candidate Handbook, have read it, and agree to be bound by it. I also agree to be bound by all NCCCO policies and procedures, as they may be amended from time to time, including without limitation those posted at nccco.org. I further attest that I am physically and mentally capable of safely operating equipment and/or demonstrating signals on the day of the Practical Examination. I understand and agree that any personal injury and/or property damage resulting from or caused in any way by my participation in the CCO Practical Examination is not and shall not be the responsibility of NCCCO. I understand that if at any point during my certification period I fail to meet any of the requirements outlined above, or if matters arise that can affect my capability to continue to fulfill certification requirements, I must report it to NCCCO immediately and agree to cooperate with any subsequent investigation regarding such matters.

CANDIDATE SIGNATURE	DATE
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METHOD OF PAYMENT FOR CANDIDATE EXAMINATION FEES

Do not send cash.

<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	Personal check enclosed	<input type="checkbox"/>	Employer check enclosed	<input type="checkbox"/>	Money order enclosed	<i>Please do not staple your check or money order.</i>
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If paying by credit card, complete the following information:

CREDIT CARD NUMBER	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> </tr> </table>					EXPIRATION DATE	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> </tr> </table>				
NAME (Print as it appears on card)	SIGNATURE (on card)	SECURITY CODE*	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> </tr> </table>								

* Three- or four-digit code located on the card.

Checks and money orders should be payable to: NCCCO

Please send application and payments to:

NCCCO—Testing Services Department
 4141 S. Highland Drive, Suite 225
 Salt Lake City, Utah 84124

 Phone: 727-449-8525
 Fax: 801-938-9540
 Email: jhorrocks@nccco.org

CANDIDATE APPLICATION CHECKLIST

- I have completed and signed this *Recertification Exam Application*.
- I have provided credit card information or a check or money order for the correct amount due.
- I have emailed a color digital photo (full face, no sunglasses, no hat) to photos@nccco.org and labeled it with my full name and birth date.
- I do not have a digital photo, so I am attaching a 1¾"× 1¾" passport photo with this application.

For additional information regarding **recertification**, contact:

National Commission for the Certification of Crane Operators (NCCCO)	Phone: 703-560-2391	info@nccco.org
2750 Prosperity Avenue, Suite 505	Phone: 703-560-2392	www.nccco.org
Fairfax, VA 22031		