



Certification Exam Application

2018 AABB Annual Meeting Special Exam Administration

October 11, 2018 • Boston, MA • Boston Convention and Exhibition Center (BCEC)

Application Deadline: August 31, 2018

Exam: Quality Auditor (CQA) • Exam starts at 10:00 a.m.

FEE

Check the applicable box below. If you are interested in becoming a member, include payment for membership options with your certification fee. You may pay by check, money order, bank draft, Visa, MasterCard, or American Express. Tuition vouchers and purchase orders are not accepted.

Your application will be returned unprocessed if payment is not enclosed. \$70.00 of your fee is an application fee and is not refundable.

Quality Auditor (CQA) CQAAABB1018	Retake	USD\$298.00	<input type="radio"/>
	ASQ Member	USD\$348.00	<input type="radio"/>
	Nonmember	USD\$498.00	<input type="radio"/>

Directions

- After completing this application, you may want to print an additional copy for your records.
- We will make every effort to process your application within two business days of receipt. Your credit card will be charged when your application is processed and a receipt will be mailed to you.
- If you haven't received your confirmation within two weeks of mailing or faxing your application, please contact ASQ Customer Care at help@asq.org.

Payment Options

We can accept Visa, MasterCard, American Express, check, money order, or bank draft.

You can mail your application with the appropriate fees to:

ASQ

Attn: Certification Offerings

P.O. Box 3066

Milwaukee, WI 53201-3066.

\$70.00 of your fee is an application fee and is not refundable. Please note that mailed-in payments must be postmarked by the exam application deadline.

Applications may also be faxed with credit card information to 414-272-1734.

Cancellation/Reschedule Policy

A \$70.00 fee will be charged if you reschedule or cancel your exam no later than five business days prior to the exam. If you provide fewer than five days' notice, you will forfeit all fees and need to reapply.

MAIL TO: ASQ, Attn Certification Offerings, PO Box 3066, Milwaukee, WI 53201-3066 or FAX TO: 414-272-1734

For questions call ASQ Customer Care at:

USA and Canada: 800-248-1946

Mexico: 001-877-442-8726

All other locations: +1-414-272-8575

ASQ Membership Number _____

If you are not an ASQ member, leave blank.

Title: Mr. Ms. Dr. Mrs.

First Name

Last Name

Middle Initial

Preferred Mailing Address: Business Home

Employer Name

Job Title

Business Address 1

Business Address 2

Business City

Business State

Indicate "NA" if state and/or postal code are not applicable.

Business Zip/Postal Code

Business Country

Business Phone

FAX

Home Address 1

Home Address 2

Home Apartment/Suite

Home City

Home State

Home Zip/Postal Code

Indicate "NA" if state and/or postal code are not applicable.

Home Country

Home Phone

Email Address

PAYMENT INFORMATION

Credit Card Type: MasterCard Visa American Express

Credit Card Number

CVV

Expiration Date

Name of Cardholder

Address of Cardholder

Same as purchaser New

City of Cardholder

State/Province of Cardholder

Indicate "NA" if state and/or postal code are not applicable.

Zip/Postal Code of Cardholder

Country of Cardholder

Fees subject to change without notice. If the payment amount submitted is incorrect or a price increase occurs, we will bill you accordingly or charge your credit card the appropriate amount.

Please fill out additional information on page 2.

**SEATING IS LIMITED FOR ALL EXAMS.
DON'T WAIT UNTIL THE LAST MINUTE – REGISTER NOW!**
Application Deadline – August 31, 2018

EXAMINATION DATE AND LOCATION

Exam: Quality Auditor (CQA)
2018 AABB Annual Meeting Special Exam Administration
Boston, MA • Boston Convention and Exhibition Center (BCEC)
October 11, 2018 • Exam starts at 10:00 a.m.

Application Deadline: August 31, 2018
Your application must be received by the application deadline.

EDUCATION

Complete the section below showing the highest completed educational degree or diploma you have received, the name and location of the institution conferring it, and the year you received it. You may not claim any credit for nondegree education or for partially completed degree programs.

International applicants must provide documentation to verify educational equivalency.

Degree/Diploma _____
Year _____
Name of Institution _____
Location of Institution _____

ASQ CODE OF ETHICS

Fundamental Principles

ASQ requires its representatives to be honest and transparent. Avoid conflicts of interest and plagiarism. Do not harm others. Treat them with respect, dignity, and fairness. Be professional and socially responsible. Advance the role and perception of the quality professional.

Expectations of a Quality Professional

Act with Integrity and Honesty

1. Strive to uphold and advance the integrity, honor, and dignity of the quality profession.
2. Be truthful and transparent in all professional interactions and activities.
3. Execute professional responsibilities and make decisions in an objective, factual, and fully informed manner.
4. Accurately represent and do not mislead others regarding professional qualifications, including education, titles, affiliations, and certifications.
5. Offer services, provide advice, and undertake assignments only in your areas of competence, expertise, and training.

Demonstrate Responsibility, Respect, and Fairness

1. Hold paramount the safety, health, and welfare of individuals, the public, and the environment.
2. Avoid conduct that unjustly harms or threatens the reputation of the Society, its members, or the quality profession.
3. Do not intentionally cause harm to others through words or deeds. Treat others fairly, courteously, with dignity, and without prejudice or discrimination.
4. Act and conduct business in a professional and socially responsible manner.
5. Allow diversity in the opinions and personal lives of others.

Safeguard Proprietary Information and Avoid Conflicts of Interest

1. Ensure the protection and integrity of confidential information.
2. Do not use confidential information for personal gain.
3. Fully disclose and avoid any real or perceived conflicts of interest that could reasonably impair objectivity or independence in the service of clients, customers, employers, or the Society.
4. Give credit where it is due.
5. Do not plagiarize. Do not use the intellectual property of others without permission. Document the permission as it is obtained.

COMPLIANCE WITH RULES

Please read the ASQ Code of Ethics. Compliance with the Code of Ethics is mandatory for all certified individuals, whether or not they are members of ASQ.

I have read and I understand the ASQ Code of Ethics, and agree to comply with it.

Signature _____

WORK EXPERIENCE

IF YOU DO NOT MEET ALL OF THE NECESSARY QUALIFICATIONS, YOU WILL NOT BE ALLOWED TO TAKE THIS EXAM.

CQA requires EIGHT years of higher education and/or work experience including THREE years in a decision-making position.

All work experience must relate to one or more areas of the body of knowledge of that specific certification.

“DECISION MAKING” is defined as having the authority to define, execute, or control projects/processes and being responsible for the outcome.

- Certificate/Diploma from a technical or trade school 1 year
Associate’s degree (college or technical institute) 2 years
Bachelor’s degree 4 years
Master’s/Doctoral degree 5 years

You must attach a résumé or provide your work experience below; employment dates must be by month/year.

This is a mandatory field.

Work Experience:

Job Title _____
From (mm/yy) _____ To (mm/yy) _____

Employer _____

Address _____

Supervisor _____

Job Title _____

From (mm/yy) _____ To (mm/yy) _____

Employer _____

Address _____

Supervisor _____

Job Title _____

From (mm/yy) _____ To (mm/yy) _____

Employer _____

Address _____

Supervisor _____

SPECIAL NEEDS

Please indicate if you have special needs that we can address. You must also contact the Certification Offerings workgroup regarding your special needs at cert@asq.org.

