



Employer Certification Cancellation Request

I am authorized, on behalf of my organization, to request that any fees paid for certification exams be refunded and the orders be canceled.

I affirm that this statement is truthful and accurate and understand there will be a nonrefundable \$70 fee for the cancellation.

Please cancel the below exam appointment:

Employee Name (print): _____

Title: _____

Organization: _____

Date: _____

Signature: _____