

# COS-C EXAM APPLICATION



OASISANSWERS™

simplifying the complex

## PAPER & PENCIL

Online exam application also available at [oasisanswers.com](http://oasisanswers.com)

PLEASE CAREFULLY PRINT WHEN COMPLETING THE FORM BELOW.

ALL REGISTRATION PAYMENTS MUST BE RECEIVED PRIOR TO A CANDIDATE SITTING FOR ANY EXAM. **NO EXCEPTIONS!**

**Paying by credit card?** Complete form and fax to 425.868.5484.

**Paying by check?** Make checks payable to OASIS Answers.

Mail with form to: PO Box 2768, Redmond, WA 98073.

COS-C EXAM LOCATION - CITY:

STATE:

EXAM DATE:

### CANDIDATE'S FULL NAME:

As you would like it to appear on your certificate. PLEASE PRINT!

### CANDIDATE'S DATE OF BIRTH:

Use the format 01/01/1900

### CANDIDATE'S E-MAIL ADDRESS:

Must be unique! For confirmation and to verify exam history.

WORK

PERSONAL

### AGENCY / COMPANY NAME:

### CANDIDATE'S ADDRESS:

Where your results are mailed. Please indicate address type. (Street, City, State, Zip Code)

WORK

HOME

### CONTACT PHONE:

WORK

HOME

CELL

ARE YOU A CURRENT COS-C?  YES  NO

HAVE YOU TAKEN THE COS-C EXAM BEFORE?  YES  NO

### SELECT YOUR REGISTRATION RATE:

\*Registration is discounted by \$50 if the exam is preceded by OASIS Answers' "Blueprint for OASIS Accuracy" Workshop.

#### INITIAL EXAM

#### RENEWAL EXAM\*\*

Regular registration rate

\$300

\$250

\*\*Renewal rates available only to active COS-C's

"Blueprint" exam discounted rate\*

\$250

\$200

CREDIT CARD TYPE:  VISA  MC  AMEX

EXPIRATION:

/

ZIP CODE:

CARD NUMBER:

CVV NUMBER:

NAME ON CARD:

SIGNATURE:

CANCELLATIONS/TRANSFERS: Exam Registration fee is non-refundable. Transfer or product credit will apply.