



InterNACHI Proctored Exam Form

This form must be sent to InterNACHI immediately after the proctoring session is complete. This form must be sent by the **proctor**.

Do not mail this information. Send this information electronically via email to the Education Department at education@internachi.org

Information not submitted to InterNACHI may cause the credits to not count toward fulfilling the Licensee's CE requirements.

Proctor name (printed): _____

Proctor title (printed): _____

I, the proctor, provide proctored testing services to examinees in controlled, proctored environments, and I have proctored an exam session for the individual named below.

Proctor signature: _____

Today's date and time: _____

Licensee's name (printed): _____

Licensee's address: _____

Licensee's Home Inspector license number: _____

CE course name: _____

CE course #: _____

Date of proctored examination: _____

Location of proctored examination: _____

Exam score: _____