



## Candidate Registration Form – ExF Foundation & ExF Foundation Plus

<b>FIRST NAME</b>			
<b>SURNAME</b>			
<b>STREET</b>			
<b>TOWN/CITY</b>			
<b>COUNTY/STATE</b>			
<b>COUNTRY</b>		<b>POST/ZIP CODE</b>	
<b>TEL. NUMBER</b>			
<b>E MAIL ADDRESS</b>			
<b>NI/I.D NUMBER</b>		<b>DATE OF BIRTH</b>	

### Formal Electrical/Instrument Qualifications and/or other Relevant Craftsperson Certification

Qualifications	Date Awarded
.....	.....
.....	.....
.....	.....
.....	.....

### Current/Previous CompEx Certification

Module	Certificate Number	Candidate ULN (If known)
.....	.....	.....
.....	.....	.....
.....	.....	.....

### Brief History of Employment in Electrical Industry and/or Hazardous Area Environments

Date	Employer	Job Role/Experience Gained
.....	.....	.....
.....	.....	.....
.....	.....	.....

**Industry Sector:** (Please highlight which Industry sector you work in by ticking the relevant box)

Oil & Gas	<input type="checkbox"/>	Chemicals	<input type="checkbox"/>	Utilities	<input type="checkbox"/>
Pharmaceutical	<input type="checkbox"/>	Food & Beverage	<input type="checkbox"/>	Manufacturing	<input type="checkbox"/>
Fuel Distribution & Retail	<input type="checkbox"/>	Maritime	<input type="checkbox"/>	Electrical Contractor	<input type="checkbox"/>
Equipment manufacturer/Distributor	<input type="checkbox"/>	Other	<input type="checkbox"/>		

This Registration form covers all ExF Foundation Module variants. Candidates must select the modules that they wish to be assessed in:

**Full Course modules:** (Please tick as appropriate)

ExF	ExF NEC 500	ExF NEC 505	ExF PLUS	ExF PLUS NEC 500	ExF PLUS NEC 505
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Declaration of Acceptance of Scheme Requirements:**

In signing this registration form the applicant agrees to:

- Comply with the requirements for certification.
- Make claims for certification only with respect to the scope for which certification has been granted.
- Not use the certification in such a manner as to bring the Certification Body (JT Limited) into disrepute. (Misuse or falsifying of a CompEx Certificate will result in an 18 month ban from registering onto any CompEx Course)
- Not make any statement regarding the certification which the Certification Body (JT Limited) may consider misleading or unauthorised.
- Not make any statement regarding the certification which an employer or contractor may consider misleading.
- Discontinue the use of all claims to certification that contains any reference to the Certification Body (JT Limited) or certification upon suspension or withdrawal of certification; and to return any certificates issued to the Certification Body (JT Limited).
- Not use the certificate in a misleading manner.
- The processing and storage of personal data and results, as detailed in the CompEx JT Limited Privacy Policy (JTL960) <https://compex.org.uk/centres/resource-centre/> and in accordance with the General Data Protection Regulations 2018
- Inform the certification body (JT Limited), without delay, of matters that can affect their capability to continue to fulfill the certification requirements.
- Commit not to release confidential examination materials or participate in fraudulent test-taking practices.
- Provide the Licensed Centre with evidence of qualifications/original certification/craftsperson certificates as recorded on this Candidate Registration form.
- Declare any special needs that they feel must be taken into consideration during the certification process.

*Please ensure relevant boxes are ticked for the registration to be processed:*

<input type="checkbox"/>	I agree to allow my details as listed in the above Scheme Requirements, to be processed and stored in accordance with the CompEx/JT Limited Privacy Policy
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Signature: .....

Print Name: ..... Date: .....

**Centre Confirmation** (to be completed by Licensed Compex Instructor/Assessor)

I have checked the above details and verify that they are complete and accurate and that I have seen supporting evidence of identification. Foundation Certificate will be issued if successful (please tick box)

Instructor/Assessor Signature: ..... Date: .....

Print Name: ..... Centre Name: .....

JT Limited CompEx, Third Floor, Redwither Tower, Redwither Business Park, Wrexham, LL13 9XT.