



ASFPM CFM® EXAM RETAKE APPLICATION



ASFPM Certified Floodplain Manager (CFM®) Program

Mr. Ms.

Last Name First Middle Initial (must match name on government issued ID)

Email: _____ Date of Birth: _____

Daytime Phone: _____ Employer: _____

Home Address: _____

Signature: _____ ADA Accommodation Needed

Exam Details: Online Exam: Meazure Learning Exam Facility:

Exam Event (conference/workshop): Event Location & Date: _____

FEES: Re-examination Fee..... \$ 85

Check enclosed Credit Card Purchase Order

Check or PO number: _____

PAYMENT AMOUNT TOTAL: \$ _____

Card #: _____ Exp date: _____ CCV: _____

Cardholder's Name: _____ Cardholder's Zipcode: _____

Signature: _____

Retake exam fee only applies within 12 months of initial exam. Otherwise, applicant must re-submit original application and original fees.

1. Registration is not complete until all fees are received by ASFPM. Payments made by purchase order will be held until actual fees are received. Exam scheduling will not proceed until fees are received by ASFPM.
2. Exam eligibility will expire one year from the date of registration and any unscheduled exam request will be terminated.
3. No refunds will be provided after fees are processed and received by ASFPM.
4. Additional fees may be required by Meazure Learning to cancel or reschedule an exam.

Mail to: ASFPM, 8301 Excelsior Dr., Madison, WI 53717

or send via email to: cfmexam@floods.org

Phone: 608-828-3000 Fax: 608-828-6319

**OKLAHOMA FLOODPLAIN MANAGERS ASSOCIATION, INC.
CERTIFICATION RETAKE APPLICATION**

Date of Previous Exam _____



OFMA Fees: Re-examination Fee \$25.00

1. Applicant's Name

(Last) (First) (Middle)

2. Email

3. Phone

4. Employer

5. Home Address

6. Work Address

7. Signature

Mail to OFMA, P.O. Box 8101, Tulsa, OK 74101, cschultz@cimtel.net

*Change in employment, address, etc. since original application may require new application for CFM exam.