



National Center for Competency Testing

7007 College Blvd., Ste. 385, Overland Park, KS 66211

Phone 800.875.4404; Fax 913.498.1243

Office Hours: M-Th 8:30am - 7:00pm CST

Friday 8:30 am - 5:00pm CST

Saturday 9:00am - 3:00pm CST

GE-0007

Name Change Notification and Requests for Duplicate Certificate(s) and Card(s)

Date _____

ID Number _____

Prior Name _____

New Name _____

Address _____

City _____ State _____ Zip _____

Phone Number _____ - _____ - _____

Email Address _____

NOTE

Name change notifications must include appropriate documentation, such as a court order, marriage license, divorce decree, etc.

Requests For Duplicate Certificate(s) and Card(s)

Candidates who need a duplicate certificate(s) and card(s) may obtain one (1) for a processing fee of \$15.00 per certification discipline.

Please select below the certification type(s) and number of copies you wish to purchase.

- | | |
|--------------------------------------|--------------------------------------------|
| <input type="checkbox"/> NCMA _____ | <input type="checkbox"/> NCPCT _____ |
| <input type="checkbox"/> NCPT _____ | <input type="checkbox"/> NCET _____ |
| <input type="checkbox"/> NCICS _____ | <input type="checkbox"/> TS-C (NCCT) _____ |
| <input type="checkbox"/> NCMOA _____ | <input type="checkbox"/> CPI _____ |

Pay by: Check Money Order Visa MasterCard

Amount \$ _____

Credit Card Number _____ - _____ - _____ - _____ Exp. Date _____ / _____

Cardholder Name _____

Billing Address _____

City _____ State _____ Zip _____

Cardholder Signature _____