



## EXAM REGISTRATION

NAME: \_\_\_\_\_

EMPLOYER/SCHOOL: \_\_\_\_\_

**Please check one below:**

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Banquet Server          | <input type="checkbox"/> Freshwater Angling Guide    | <input type="checkbox"/> Sales Manager                   |
| <input type="checkbox"/> Bartender               | <input type="checkbox"/> Front Desk Agent            | <input type="checkbox"/> Supervisor                      |
| <input type="checkbox"/> Casino Slot Attendant   | <input type="checkbox"/> Guest Services Attendant    | <input type="checkbox"/> Tour Director                   |
| <input type="checkbox"/> Event Coordinator       | <input type="checkbox"/> Heritage Interpreter        | <input type="checkbox"/> Tour Guide                      |
| <input type="checkbox"/> Event Manager           | <input type="checkbox"/> Housekeeping Room Attendant | <input type="checkbox"/> Tourism Trainer                 |
| <input type="checkbox"/> Food & Beverage Manager | <input type="checkbox"/> Line Cook                   | <input type="checkbox"/> Tourism Visitor Info Counsellor |
| <input type="checkbox"/> Food & Beverage Server  | <input type="checkbox"/> Reservations Sales Agent    | <input type="checkbox"/> Wine Service                    |
|  |  | <input type="checkbox"/> <i>Tourism Essentials</i>       |

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EXAM TYPE: (please check one)     ONLINE     PAPER-BASED

**Paper-Based Exams:** Designated dates for exams and ordered at least 30 days in advance.  
Please provide two weeks cancellation to avoid a \$25.00 plus HST rescheduling fee.  
Please contact the *emerit* Program Manager for writing dates:

Name of Proctor: \_\_\_\_\_

Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email Address of Proctor: \_\_\_\_\_

Phone Number of Proctor: \_\_\_\_\_

Exam Location: \_\_\_\_\_

(Call (604) 633-9787 ext 229 to set up a site in your area)

Date of Exam: \_\_\_\_\_ Time of Exam: \_\_\_\_\_

**Important to note:** Candidates have the right to appeal examination scores within 60 days after receiving their results

By submitting the information filled out on this form, you give us your consent to: create a profile for you in *emerit's* learning management system; record your exam scores to determine your eligibility to obtain recognition and contact you with related correspondence if needed, at your home or workplace (based on your preference).

I hereby authorize **go2** to release the results of my written exam to my employer or instructor, if requested.     Yes     No

Candidate Signature: \_\_\_\_\_ Date: \_\_\_\_\_



**go2** – the resource for people in Tourism  
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