



CRNI® EXAMINATION SUBSTITUTION POLICY

If the original applicant is unable to sit the CRNI® Examination, a substitute candidate can apply. To substitute an alternative candidate, submit this form, with a \$50 substitution fee and the substitute's Examination Application Form to INCC at 315 Norwood Park South, Norwood, MA 02062 or fax to (781) 440-9409. All forms should be received by the regular deadline of July 10, for a September administration, and January 10, for a March administration.

CRNI® EXAMINATION SUBSTITUTION AUTHORIZATION FORM

I _____, as the payee of the original registration fee, wish to
(print name)

substitute _____, in place of _____,
(print new candidate's name) (original candidate)

for the March or September CRNI® Examination.
(year) (year)

(signature)

(street address) (city) (state) (zip)

METHOD OF PAYMENT

\$50 administrative fee payable by:

Check / Money Order payable to INCC (if mailing forms)

MasterCard/Visa/Amex # _____

Exp. Date _____

(print name)

(Signature)

Mail this form, with a \$50 substitution fee and the substitute's Examination Application Form to **INCC at 315 Norwood Park South, Norwood, MA 02062 or fax to (781) 440-9409**. All forms should be received by the regular deadline of July 10, for a September administration, and March 10, for a March administration.