



D&S Diversified Technologies

DBA HEADMASTER

333 Oakland Ave, PO Box 418,

Findlay OH 45839

Toll Free: 877-851-2355 or 877-201-0758

Fax: 419-422-8328 or 419-422-8367

www.hdmaster.com

Dear Candidate,

Since you are a waiver candidate the test site must authorize you to test at their facility. You will need to complete SECTION 1 of this form. The facility where you would like to test must complete SECTION 2 of this form. Once BOTH sections have been completed please fax this form to D&S. This form is required to be sent to D&S in order to schedule the skills exam.

Please fax this form to 419-422-8328 or 419-422-8367 **ATTENTION: JESSICA OR ROSE**
--- PLEASE CONTACT D&S AT 877-851-2355 TO VERIFY RECEIPT OF THIS FORM AFTER FAXING---

SECTION 1: CANDIDATE INFORMATION

(this section is to be completed by the candidate)

***** A CONFIRMATION WILL BE MAILED/EMAILED TO YOU TO CONFIRM YOUR TESTING DATE*****

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Date of Birth: _____ Social Security #: _____

Email: _____

Phone: _____

SECTION 2: TEST SITE INFORMATION

(this section is to be completed by the instructor)

***** THE "10 BUSINESS DAY POLICY" & THE "10 CANDIDATES PER TEST DAY POLICY" STILL APPLIES WHEN AUTHORIZING WAIVER CANDIDATES TO TEST ON YOUR TEST DATE *****

Name of Test Site: _____

Test site #: _____ Test Date: _____

Scheduled Evaluator: _____

Instructor Signature: _____ Date: _____

Phone: _____ Fax: _____