

Certificate in Principles of Public Relations Examination Application for Students

The Universal Accreditation Board thanks you for applying to take the Certificate in Principles of Public Relations Examination. To qualify, applicants must be undergraduate seniors in a public relations or related program AND within six months from the date of receipt of an undergraduate degree. Students must be members of PRSSA or student chapter of a Universal Accreditation Board participating organization (e.g. FPRA or SPRF).

How to Apply:

1. TYPE or PRINT your response.
2. Complete all information requested. Your application will not be accepted if it is not complete.
3. Return your application and payment to the Certificate program faculty coordinator for your school.
4. Questions? Contact PRSA Headquarters by calling (212) 460-1436 or emailing accred@prsa.org.

Name _____

Note: Your name on application must match government-issued photo ID you will be bringing to the Prometric test site.

College/University _____

Student Organization (circle one): PRSSA FPRA SPRF

School Address _____

City _____ State _____ Zip _____

School Email _____

Year in school (circle one): Junior Senior Anticipated graduation date: _____

Name of Faculty Coordinator _____

Major: _____

Minor: _____

Permanent Address _____

City _____ State _____ Zip _____

Mobile Phone _____ Personal Email _____

Check which applies to you regarding the required preparatory course for the Certificate in Principles of Public Relations. I am preparing ... (check one):

_____ In-person, organized through my university's faculty coordinator

_____ Online, organized by the UAB using the online study course (additional \$50 fee applies)

AGREEMENT BY APPLICANT

In order to take the Certificate in Principles of Public Relations Examination, all candidates must read and agree to the following provisions. Please confirm that you understand and agree to each of these provisions by signing where indicated.

I attest to the fact that I meet the eligibility requirements identified for the Certificate in Principles of Public Relations examination.

I agree that I will neither bring to nor utilize, during the Certificate examination any equipment, device or recorded information or data that which provides an unfair advantage and that is not expressly approved for use by the Universal Accreditation Board, the Accreditation Department and the Examination proctor.

I understand and agree that my answers to Certificate in Principles of Public Relations examination must be selected within the prescribed time allotted for taking the examination.

I understand and agree that I bear the risk of any and all damage or loss incurred to the equipment, data and supplies that are provided to me in the event that any occurrence prohibits me from completing the Certificate examination.

I agree to indemnify and hold harmless the Universal Accreditation Board, PRSA, the Participating Organizations (ARC, FPRA, MPRC, NSPRA, RCC, SHSMD, SPRF) and any other organization or individual associated with the Certificate examination in the event of malfunction, loss, theft, or damage to the equipment, data and supplies that are provided to me to take the Certificate examination. Further, I waive any rights of legal or other recourse to such organizations or individuals in the event of such loss, theft or damage.

I understand and agree to abide by the *PRSA Member Code of Ethics*. I agree to exemplify high standards of honesty and integrity by maintaining the confidentiality of the contents of this Beta Examination, including questions and my responses to those questions. **I understand and agree** that discovery of practices not in compliance with the Code will result in immediate expulsion from the Certificate examination, automatic failure and any liability for other penalties imposed for violation of the *Member Code of Ethics*.

I understand and agree that bringing any notes, electronic or written, into the testing site or the removal of any questions or answers from the testing site are practices not in compliance with the *PRSA Member Code of Ethics*.

I understand and agree that I am responsible for making my own appointment with a Prometric testing center. If I am late for the appointment, I may not be admitted. Late admission is at the discretion of the Prometric testing center. If I miss the appointment, a rescheduled appointment will not be allowed and thus will not be entitled to a refund of any fees paid.

I understand and agree that if I begin the Certificate examination and then choose not to complete the examination at this time, the proctor will take note of my decision and will cancel my examination. Further, **I understand and agree** that if I choose not to take the Certificate examination at this time, I will be considered to have been admitted to the examination and thus will not be entitled to a refund of any fees paid.

I understand that I must successfully complete the examination to be granted the Certificate in Principles of Public Relations.

I hereby apply for the Certificate in Principles of Public Relations examination. Indicate your understanding of and agreement with these provisions by signing below. *Please note: your signature must match the photo identification document you will bring to the Prometric test site.*

Signature

Date

Note: You will also be asked to agree to these statements again at the Prometric location in order to begin the Certificate in Principles of Public Relations examination.

The fee for the Certificate in Principles of Public Relations examination is \$150; (\$125 examination fee plus \$25 application fee.). If you wish to take the Certificate for Principles in Public Relations Online Study Course, there is an additional fee of \$50 and must be paid online (link).

Fees are not refundable or transferable. It will be refunded only if the applicant is not approved to take the Certificate in Principles of Public Relations examination. No refund will be made once the Examination is taken.

METHOD OF PAYMENT:

Check (payable to PRSA)

Account Number: _____

Expiration Date: _____

Credit Card: (circle one)
American Express, MasterCard, Visa

Cardmember's Name: _____

Signature: _____