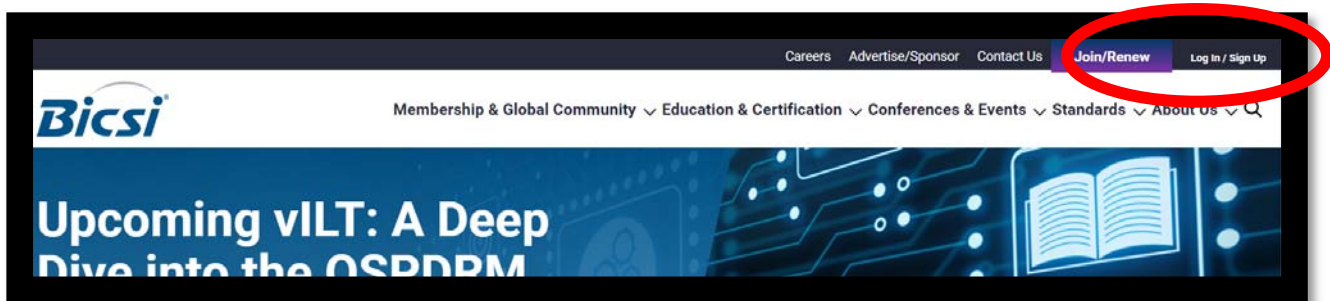


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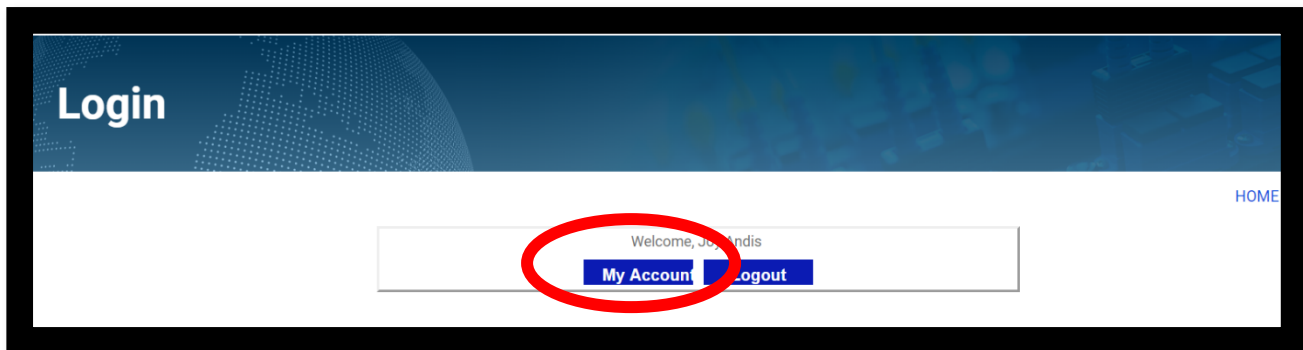
Students Guide

Click on the “Log In/Sign up” link to log into your BICSI profile or create a new BICSI profile, if you do not already have one

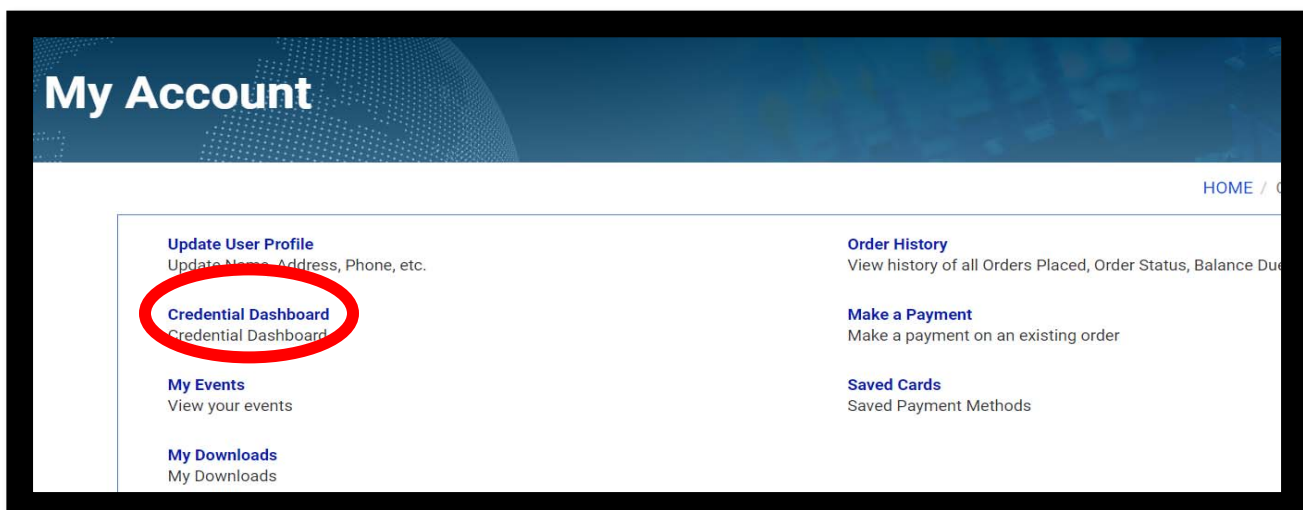
- Please verify that your BICSI profile has a business address, home address and cell phone number before beginning your application



When you are logged in, click on the “My Account” link



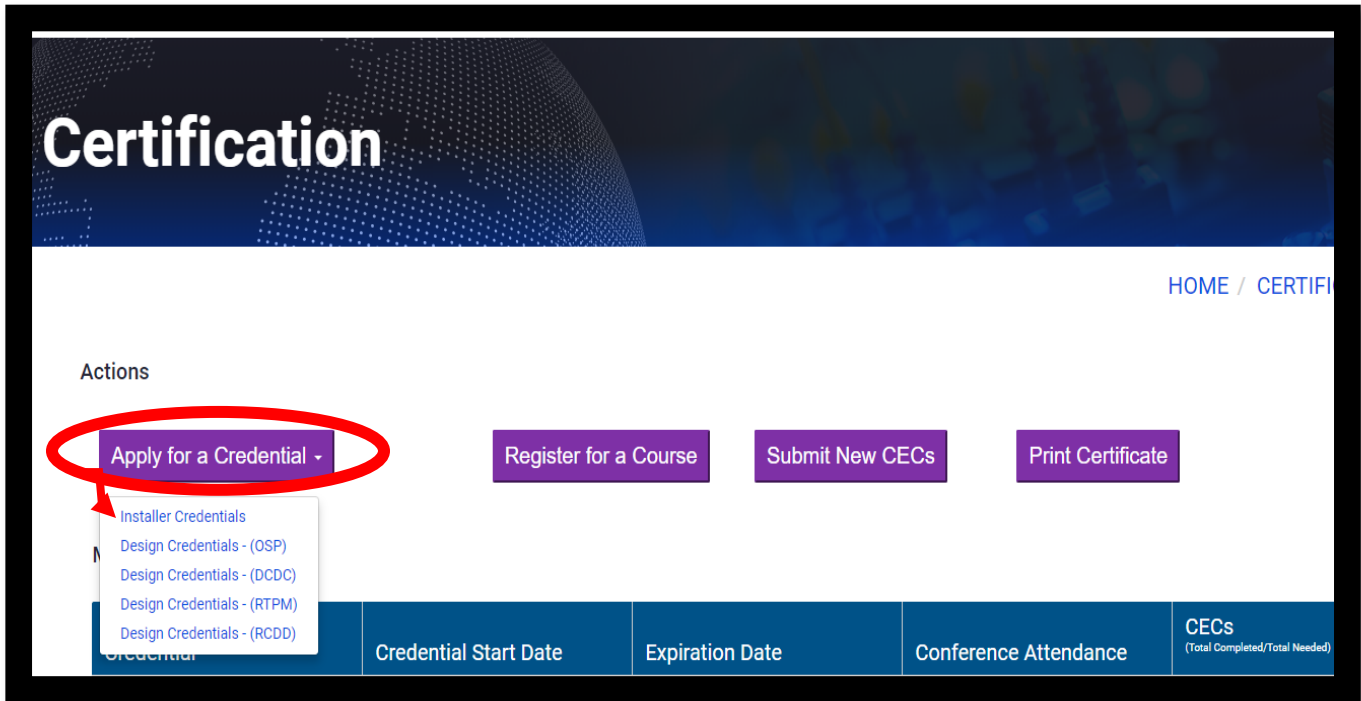
On the “My Account” screen, click on the “Credential Dashboard” link



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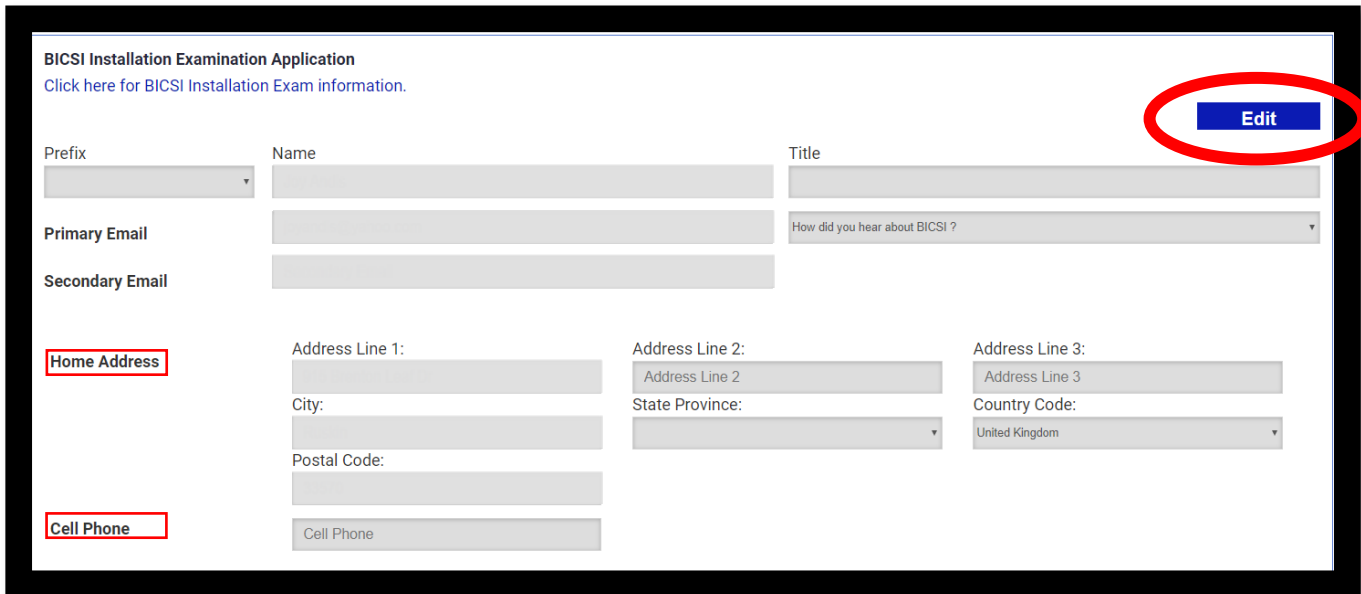
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Click on the “Apply for a Credential” drop down box and select “Installer Credentials”



The screenshot shows the 'Certification' page with a navigation breadcrumb 'HOME / CERTIFICATION'. Under the 'Actions' section, there are four buttons: 'Apply for a Credential', 'Register for a Course', 'Submit New CECs', and 'Print Certificate'. The 'Apply for a Credential' button is circled in red, and its dropdown menu is open, showing options: 'Installer Credentials', 'Design Credentials - (OSP)', 'Design Credentials - (DCDC)', 'Design Credentials - (RTPM)', and 'Design Credentials - (RCDD)'. Below the buttons is a table with columns: 'Credential', 'Credential Start Date', 'Expiration Date', 'Conference Attendance', and 'CECs (Total Completed/Total Needed)'.

Verify that your personal information is correct, including home address and cell phone numbers. To change or update, click on “Edit”

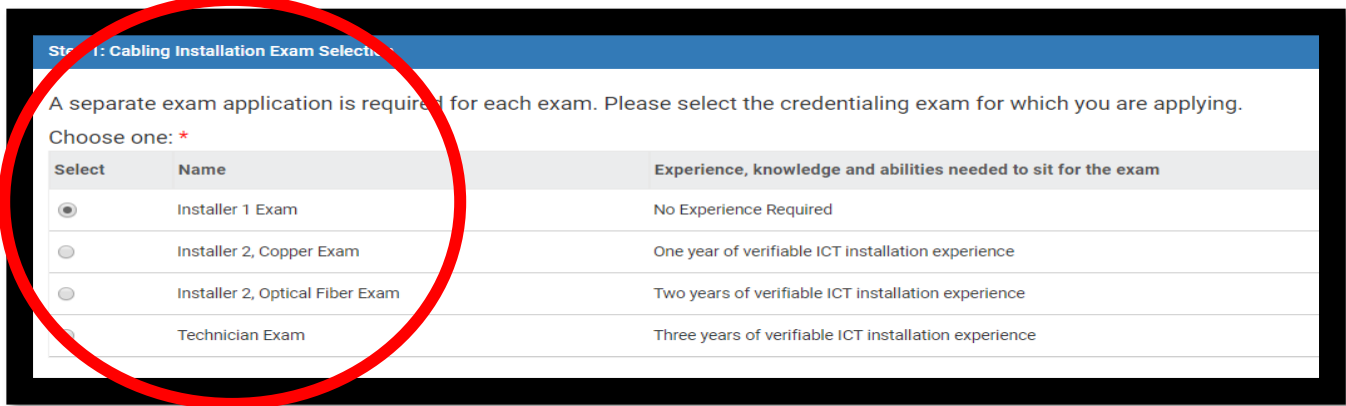


The screenshot shows the 'BICSI Installation Examination Application' form. At the top right, there is a blue 'Edit' button circled in red. The form contains several input fields: 'Prefix' (dropdown), 'Name', 'Title', 'Primary Email', 'Secondary Email', 'Home Address' (with sub-fields for Address Line 1, 2, 3, City, State Province, and Postal Code), and 'Cell Phone'. The 'Home Address' and 'Cell Phone' labels are also circled in red.

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Students Guide

Select the Installer Exam that you would like to apply for



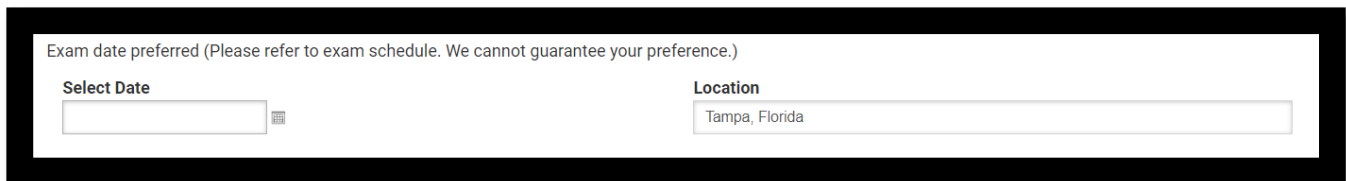
Step 1: Cabling Installation Exam Selection

A separate exam application is required for each exam. Please select the credentialing exam for which you are applying.
Choose one: *

Select	Name	Experience, knowledge and abilities needed to sit for the exam
<input checked="" type="radio"/>	Installer 1 Exam	No Experience Required
<input type="radio"/>	Installer 2, Copper Exam	One year of verifiable ICT installation experience
<input type="radio"/>	Installer 2, Optical Fiber Exam	Two years of verifiable ICT installation experience
<input type="radio"/>	Technician Exam	Three years of verifiable ICT installation experience

Enter the Exam Date and Exam Location of where you would like to take your hands-on exam

- If you are taking the exam at an ATF, this date would be the date provided to you by the ATF's certified Instructor

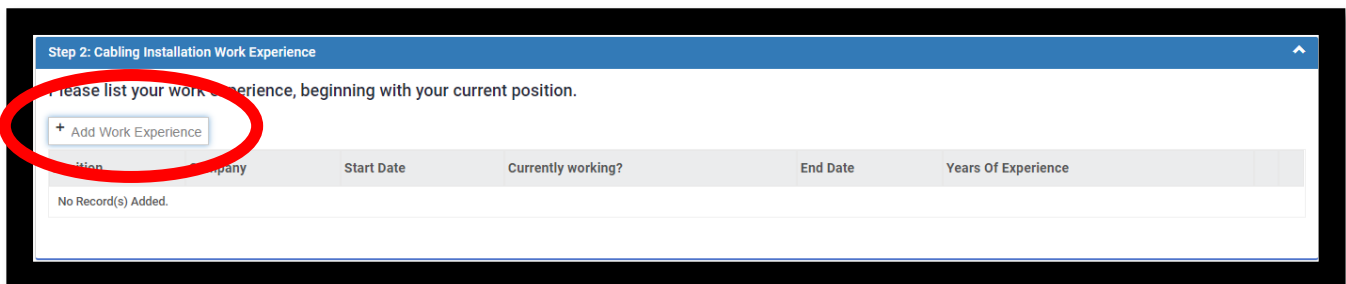


Exam date preferred (Please refer to exam schedule. We cannot guarantee your preference.)

Select Date

Location

Work Experience must be entered for Installer 2, Copper, Installer 2, Fiber and Technician Exams. To enter work experience, click on the "Add Work Experience" button



Step 2: Cabling Installation Work Experience

Please list your work experience, beginning with your current position.

Position	Company	Start Date	Currently working?	End Date	Years Of Experience
No Record(s) Added.					

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Complete the Work Experience Pop-Up Box with as much information and detail as possible

Add Work Experience

Position/Title

Company

Start Date

Currently working?

End Date

Years Of Experience

Months Of Experience

Name/Title of Supervisor

Phone

Supervisor Email

Description of Work Experience

Employment verification Contact (if not Supervisor)

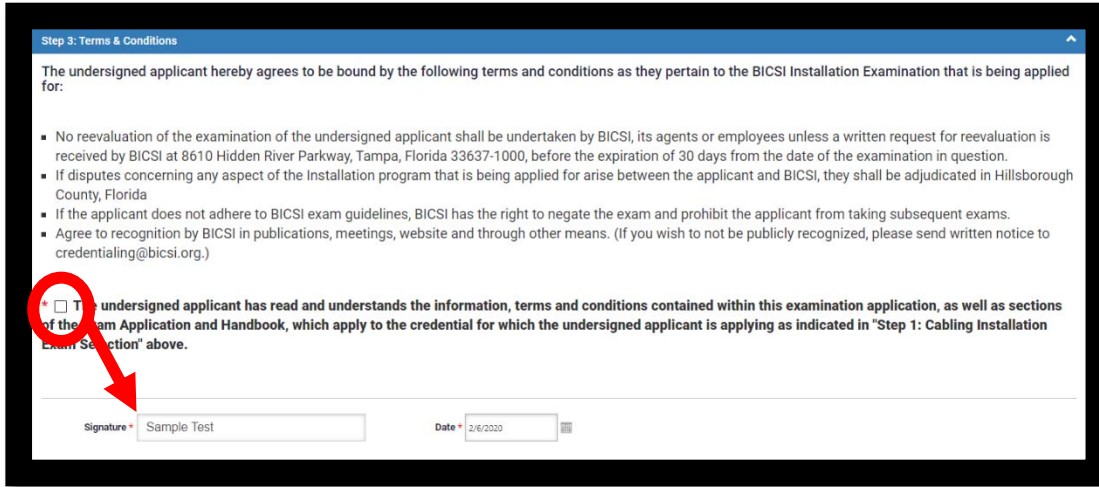
Contact Phone

Add **Cancel**

Review Step 3: Terms & Conditions. Once you have read them, check the box indicating that you have read, understand and agree to the Terms & Conditions and type in your name and today's date

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Step 3: Terms & Conditions

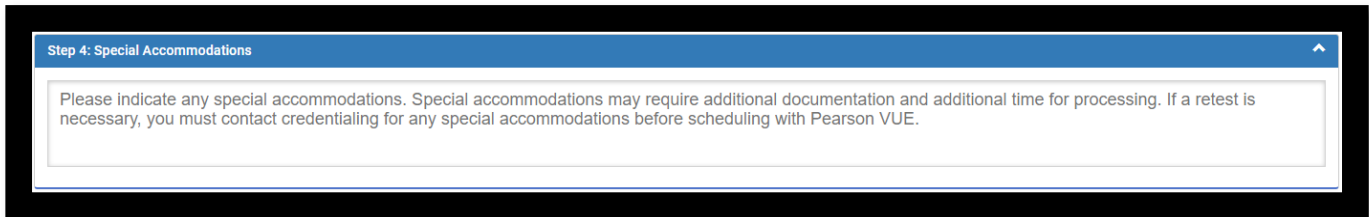
The undersigned applicant hereby agrees to be bound by the following terms and conditions as they pertain to the BICSI Installation Examination that is being applied for:

- No reevaluation of the examination of the undersigned applicant shall be undertaken by BICSI, its agents or employees unless a written request for reevaluation is received by BICSI at 8610 Hidden River Parkway, Tampa, Florida 33637-1000, before the expiration of 30 days from the date of the examination in question.
- If disputes concerning any aspect of the Installation program that is being applied for arise between the applicant and BICSI, they shall be adjudicated in Hillsborough County, Florida
- If the applicant does not adhere to BICSI exam guidelines, BICSI has the right to negate the exam and prohibit the applicant from taking subsequent exams.
- Agree to recognition by BICSI in publications, meetings, website and through other means. (If you wish to not be publicly recognized, please send written notice to credentialing@bicsi.org.)

* The undersigned applicant has read and understands the information, terms and conditions contained within this examination application, as well as sections of the Exam Application and Handbook, which apply to the credential for which the undersigned applicant is applying as indicated in "Step 1: Cabling Installation Exam Section" above.

Signature * Date *

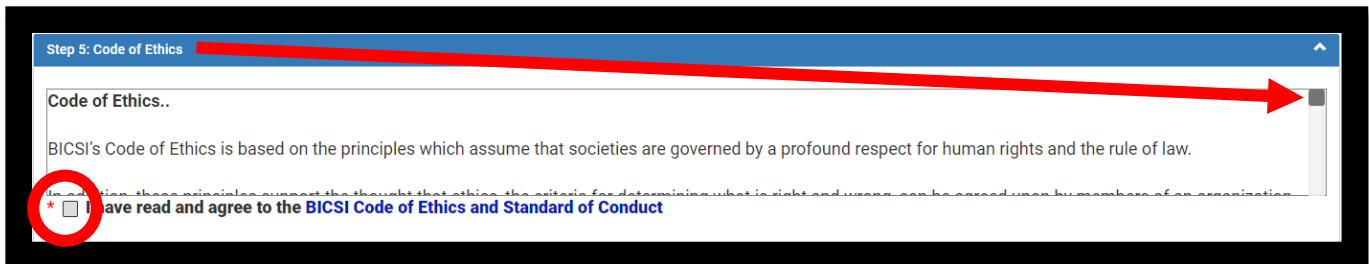
Enter any Special Accommodations you may need in the “Step 4: Special Accommodations” box



Step 4: Special Accommodations

Please indicate any special accommodations. Special accommodations may require additional documentation and additional time for processing. If a retest is necessary, you must contact credentialing for any special accommodations before scheduling with Pearson VUE.

Review the Code of Ethics by scrolling down on the box. Once you have read the Code of Ethics, check the box saying you have read and agree to the Code of Ethics.



Step 5: Code of Ethics

Code of Ethics..

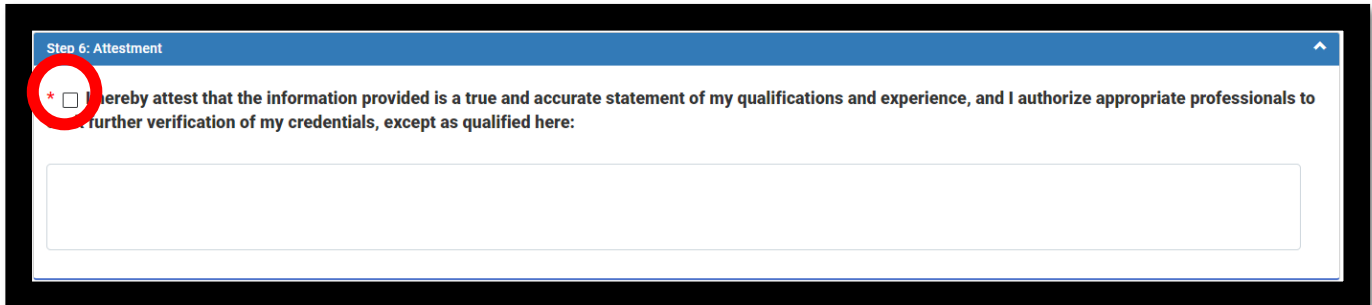
BICSI's Code of Ethics is based on the principles which assume that societies are governed by a profound respect for human rights and the rule of law.

* I have read and agree to the BICSI Code of Ethics and Standard of Conduct

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Review the Attestment by scrolling down on the box. Once you have read the attestment, check the box

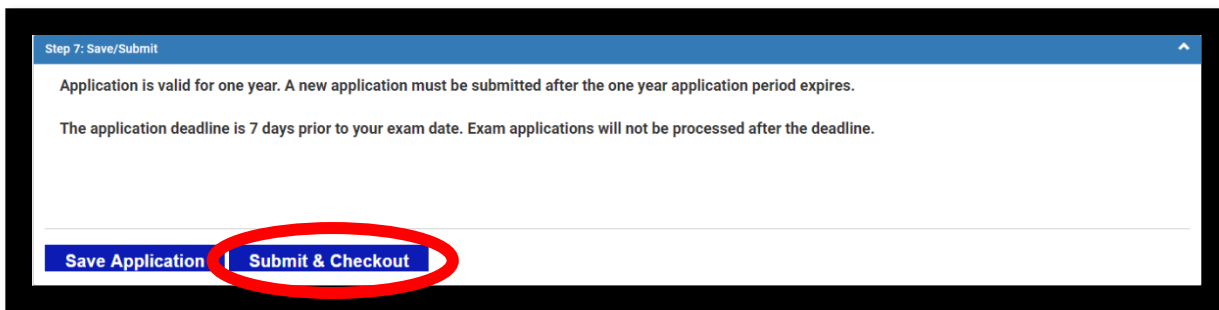


Step 6: Attestment

* I hereby attest that the information provided is a true and accurate statement of my qualifications and experience, and I authorize appropriate professionals to perform further verification of my credentials, except as qualified here:

[Empty text box for additional information]

Click on “Submit & Checkout”



Step 7: Save/Submit

Application is valid for one year. A new application must be submitted after the one year application period expires.

The application deadline is 7 days prior to your exam date. Exam applications will not be processed after the deadline.

Save Application | **Submit & Checkout**

Once you click on “Submit & Checkout”, you will be directed to your cart to enter payment information. If you have a Campaign Code, you will enter it here. Otherwise, click “Check Out” to enter payment information

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View Cart

Note: If you wish to remove a meeting from your cart, please click the hyperlink in the meeting name. This will bring you back a step where you will have the option to remove.

Remove	Product	Item Description	Unit Price	Quantity	Total Price	Auto Renew	Coupon
<input type="checkbox"/>	Installer 1 Exam	Installer 1 Exam	\$335.00	1	\$335.00		

If you have a campaign code, please enter:
 [Apply](#)

Sub-Total: \$335.00
Discount (-): \$0.00
Tax: \$0.00
Shipping: \$0.00
Total: **\$335.00**

[Continue Shopping](#) [Update](#) [Save Cart](#) [Check Out](#)

Review the information on the page and if it is all correct, click on “Next Step”

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Please review and submit your order

Default shipping address and other settings are shown below. Please use **Change Address** button below to edit current shipping address or to add a new shipping address. When completed, click the **Next Step** button to proceed.

Shipping Details		Order Summary	
Shipping To:		Sub-Total:	\$335.00
Change Address		Discount (-):	\$0.00
<input type="checkbox"/> Billing Same as Shipping		Shipping & Handling:	\$0.00
Items in shopping cart		Tax:	\$0.00
		Total:	\$335.00

Remove	Product	Item Description	Unit Price	Quantity	Total Price	Auto Renew	Coupon
<input type="checkbox"/>	Installer 1 Exam	Installer 1 Exam	\$335.00	1	\$335.00		

[Continue Shopping](#) [Update](#) [Next Step>>](#)

Enter your payment information and click "Complete Order". A confirmation receipt will be sent to your primary email on file.

Please review and submit your order

Please use **Change Address** button below to edit current bill to address or to add a new bill to address." When completed, click the **Complete Order** button to proceed"

Billing Details		Payment Information	
Billing To:		<input type="radio"/> PayPal	
Change Address		<input checked="" type="radio"/>	
		* Card Number:	
		<input type="text"/>	
		* Security # :	
		<input type="text"/>	
		Expiration Date:	
		August 2020	

Product	Description	Quantity	Unit Price	Total Price
Installer 1 Exam	Installer 1 Exam	1	\$335.00	\$335.00

Sub-Total:	\$335.00
Discount (-):	\$0.00
Shipping & Handling:	\$0.00
Tax:	\$0.00
Total:	\$335.00

[<< Back](#) [Complete Order](#)