



# Request for Certificate Consideration or Review

## Candidate Information

Date: \_\_\_\_\_

Candidate ID \_\_\_\_\_

Name \_\_\_\_\_

Company Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email address (required) \_\_\_\_\_

Office Telephone \_\_\_\_\_ Mobile Telephone \_\_\_\_\_

Which certificate are you inquiring about?  HCA  HOA  HHA

## Request type

Please check below the reason why you are contacting BMSC, with a brief description of the issue. You will be contacted by a BMSC representative within 10 business days to address your concern.

### Appeal

Certificate holders and candidates can request a BMSC review of decisions made or actions taken related to the following (check all that apply):

- Test administration
- Test results
- Certificate status (censure, suspension, revocation)
- Denial of continuing education credits

Description of problem/concern: (Please provide a detailed explanation of the event or action that occurred and why you want BMSC to review). \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**\*NOTE: ONLY the four above topics will be reviewed for an Appeal.**

### Waiver of continuing education requirement

- Short term
- Permanent

Reason for request: \_\_\_\_\_  
\_\_\_\_\_

### Extension to take the initial or retake exam or to complete continuing education requirements (Check all that apply)

Natural disaster: In the event of bad weather, a natural disaster, or another emergency (for example: a test center power outage)

Medical or Personal Emergency: A medical or personal emergency is an unplanned event that prevents you from taking the exam. A medical or personal emergency may apply to you or one of your immediate family members; spouse, child, or parent as defined by the Family Medical Leave Act. Documentation (i.e. doctor's note, emergency room forms, obituary) showing why you could not take your exam will be required.

*\*Note: If the candidate has met one of the above special circumstances, requests an extension to complete the certificate program and is approved the extension, the fees that apply are:*

- 1.) First Approved Request for an Extension - \$50 (valid for 45 days)
- 2.) Second and Final Approved Request for an Extension - \$100 (valid for an additional 30 days). No additional extension will be authorized.