



## Examination Entry Application

Applications can also be made online via the Aspeq booking system (<https://ewrb.aspeqexams.com>) from mid-April.

Training Providers can make bulk bookings using the Aspeq booking system's organisation portal. Please contact Aspeq for more information on this.

Fields marked with \* are mandatory for all applications.

### PERSONAL DETAILS

EW Number\*

Last Name\*

Email\*

First Name\*

Street Address\*

Middle Name

Preferred Name

Date of Birth\* / /

Postcode

Home Phone

Postal Address

Work Phone

(if different)

Mobile\*

Postcode

### EXAMINATION YOU ARE SITTING \*

Electrical Inspector Theory		Electrical Appliance Serviceperson Written	
Electrician Theory		Electrical Service Technician Written	
Electrician Regulations		Plumber and/or Gasfitter Written	
Electrical Installer Theory		Electrical Appliance Serviceperson (Endorsed)	

### EXAMINATION INFORMATION

Examination Centre\*

Training Provider\*

Note: The Training Provider specified here will be able to book your exams on your behalf and have access to your results.

Examination Date\* / /

Late Entry? Must be received by Aspeq less than

Yes / No

10 working days before the examination date. (please circle)

I have met the eligibility criteria as stated in the overleaf? (please circle)\*

Yes / No

**EXTRA ASSISTANCE AND SPECIAL SITTINGS (IF APPLICABLE)**

Request for: (please circle)

Additional time

A reader

Separate facilities for sitting OR request to sit on a non-scheduled exam date.

A writer

Have you sat this examination before?

Yes / No

If so, state year \_\_\_\_\_

Reason for extra assistance or special sitting request

**DECLARATION**

I declare the information I have given is correct. I declare that I have completed a prescribed tuition course with an approved training provider. I am aware that passing this examination does NOT entitle me to carry out prescribed electrical work for which electrical registration is required. I agree to the release of my results to my teaching institute/provider or examination centre and for the purpose of receiving awards.

Signature\*

Date\*

/ /

**FEES**

Examination Fee \$166.75*	
Late Fee \$85.10 (if applicable)	
Extra assistance \$368.00 (if applicable)	
Special sitting \$241.50 (if applicable)	
<b>TOTAL*</b>	

**Note: All fees for examinations are payable to Aspeq. DO NOT send any examination fees to EWRB**

**CREDIT CARD INFORMATION**

<b>Type*</b>			<b>Full Name of Cardholder*</b>	
Mastercard		Visa		
<b>Credit Card Number*</b>			<b>Signature of Cardholder*</b>	
<b>Expiry Date*</b>				
<b>Amount*</b>				

Return to: Aspeq Ltd, P O Box 30343, Lower Hutt 5010, P: 04 913 9812, F: 04 913 9814, E: [info@aspeq.com](mailto:info@aspeq.com)