

Select an individual familiar with your circumstances such as an employer, educator, or public official to confirm that you do not speak/read English as a first language. After the designated person completes the form, please upload this attestation form during your ESL accommodation request.

Candidate Name

NCARB Record Number

Attestation

As an individual familiar with the candidate’s circumstances, please complete the following attestation and return this form to the candidate.

Name of Candidate

Name of Selected Individual

I declare that the candidate noted above is a non-native English speaker/reader. I understand that providing false information on this form may be cause for disciplinary action as determined by NCARB’s Professional Conduct Committee and/or Board of Directors and/or any jurisdiction in which the candidate is registered.

Signature

Date

Relationship to candidate

Contact phone

Contact email

If you have any questions regarding completion of this form, please contact NCARB’s Customer Relations team by emailing testingaccommodations@ncarb.org.