

HCP CANDIDATE INSTRUCTIONS AND INFORMATION SHEET

HEARING AID FITTER/DEALER and SANITARIAN/ENVIRONMENTAL SPECIALIST

In the candidate window, enter the information below. If the proctor has not provided the access code for your exam, it will be provided after you have successfully logged into the testing system.

Username: _____

Password: _____

At the beginning of the exam, the proctor will provide instructions on entering additional information that is required by the credentialing agency.

If this information is not entered correctly, you may not receive your credential from the issuing agency!

FIELD NAME		INSTRUCTIONS
1. First Name:		Enter all information required for this exam as shown on current photo identification, unless proof of name change is provided.
2. Last Name:		
3. Candidate's full SSN		
4. Date on Original Letter		
5. 2-Digit HCP Test Site Code (i.e. 25)		
6. Candidate Email (Required for ALL):		

Last 5 of Social for User Account Creation: _____