



Surf

Revised 2022

This test sheet is for original exam candidates only.

Side 1: Please record each candidate's name and contact information accurately.

Prerequisites checked	Prerequisites										Result					
	1*	2*	3*	4*	5a*	5b*	6*	7a*	7b*	7c*		8*	9a*	9b*	9c*	9d*
* Items are instructor-evaluated																
1 Last name <input type="checkbox"/> M <input type="checkbox"/> F First name Address City Prov. Postal Code E-mail Phone		Date of birth														
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Check this box if there are more candidates on the reverse side of this page.
 This test sheet is Page _____ of _____ Pages

- Satisfactory Performance

- Fail

Total Pass for Exam

Total Fail for Exam

Invoicing Information

Host name (Affiliate or Organization paying the exam fees) () Telephone ()
 Street address
 City Prov. Postal code

Exam Information

Exam date: YY MM DD ()
 Facility name (e.g., name of waterfront) Telephone ()

Instructor Information

Instructor's name ID#
 E-mail address ()
 Telephone Signature

Individual who examined the candidates Same as Instructor or

Examiner's name ID#
 E-mail address ()
 Telephone Signature

Individual who apprenticed on the exam Same as Instructor or

Apprentice's name ID#



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Side 2: Please record each candidate's name and contact information accurately.

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Please complete all sections on Side 1 of test sheet. Host, exam information and examiner sections must be completed on both sides 1 and 2 of the test sheet.

<p>Invoicing Information</p> <p>Host name (Affiliate or Organization paying the exam fees)</p>	<p>Individual who examined the candidates Same as Side 1 <input type="checkbox"/> (sign below) or</p> <p>Examiner's name ID#</p> <p>E-mail address</p> <p>() Telephone Signature</p>
<p>Exam Information</p> <p>Exam date: YY MM DD</p>	