

IMPORTANT NOTICE

Before you send in your Part III registration form, please contact the State Board in the state in which you would like to be licensed. Your eligibility will be determined by the state once you satisfy the state's requirements. Prometric can only release your Authorization to Test (ATT) upon approval of the State Board.



**National Board of Podiatric Medical Examiners
Part III – Registration Instructions**

Test Dates and Deadlines

June 2, 2010
(Prometric Registration Deadline: May 5, 2010)

December 1, 2010
(Prometric Registration Deadline: October 22, 2010)

It is very important that your registration form be completed carefully and accurately. The information you provide on this form will be used by Prometric to determine your eligibility for the examination and to mail your Authorization to Test (ATT). Type or print clearly all information requested except signatures. Enter all information in the appropriate box. Prometric will not be responsible if your ATT is delayed because you failed to maintain a current address with Prometric.

Candidates should send this registration form and fee to Prometric (at the address below).

Send your transcript to the following State Boards who will, in turn, notify Prometric of your eligibility: <i>(Board addresses are listed in the Candidate Information Bulletin)</i>		
Florida	Kentucky	Tennessee

- 1.** The registration fee is \$900. Send only a certified check, cashier's check, or money order payable to the National Board of Podiatric Medical Examiners (NBPME). Personal checks will not be accepted and will be returned; a \$25 service fee will be charged. (If your registration is incomplete, it will be returned along with your fee.)
- 2.** Enter all information requested. Information regarding Social Security number, ethnic group, and gender are all optional. However, your Social Security number will be used as a secondary check in matching registration information and scores. The compiled information is for aggregate statistical purposes only; no names or individual scores will be identified with the data. It is for the exclusive use of the NBPME.
- 3.** Read the statement of certification and sign the registration form at the bottom indicating that you received your DPM and confirming that you understand the confidentiality and conduct agreement.

Mailing Address:
Prometric/NBPME
1260 Energy Lane
St. Paul, MN 55108

