

# ACE Certification Exam Stand-by Candidate

## APPLICATION

### American Council on Exercise (ACE) Certification Examination

#### ACE Office Use ONLY

Exam \_\_\_\_\_ IVC # \_\_\_\_\_  
 Amount \_\_\_\_\_ Castle ID# \_\_\_\_\_  
 Cashiers Check/Money Order No. \_\_\_\_\_

Exam:

PT     GFI

#### Personal Information

Last Name \_\_\_\_\_

First Name \_\_\_\_\_

Middle Initial \_\_\_\_\_

Social Security Number \_\_\_\_\_

E-mail \_\_\_\_\_

Mailing Address (for Score Report)     New Address

House Number and Street/Apartment Number \_\_\_\_\_

Additional Address Information \_\_\_\_\_

City \_\_\_\_\_

State/Province \_\_\_\_\_

ZIP/Postal Code \_\_\_\_\_

Country \_\_\_\_\_

Home Telephone Number \_\_\_\_\_

Business Telephone Number \_\_\_\_\_

Area code    Number

Area code    Number

Examination Date

Your Birth Date

Month    Day    Year

Month    Day    Year

Examination Center Location

City \_\_\_\_\_

State/Province \_\_\_\_\_

Country \_\_\_\_\_

If you are retaking this certification examination, indicate the previous examination date and center below.

Previous Location \_\_\_\_\_ Date \_\_\_\_\_

### THIS SECTION MUST BE SIGNED

#### AFFIRMATION

This is to affirm that the information contained in my registration form is true, complete, and correct to the best of my knowledge. I accept the conditions set forth in the ACE certification guide concerning the administration of this test, the reporting of test scores, the certification process, and policies and ACE Professional Practices and Disciplinary Procedures. I agree to release to ACE any information relevant to my certification and recertification, including proof of current CPR certification. I further understand that if any information is later determined to be false, ACE reserves the right to revoke any certification that has been granted on the basis hereof. I agree with, accept, and will adhere to the ACE Code of Ethics and ACE Professional Practices and Disciplinary Procedures to the best of my ability. I further understand that ACE certification does not certify or in any way guarantee the quality of my work as an ACE-certified Professional. I therefore agree to indemnify and hold harmless ACE, its officers, directors, and staff from any claims due to negligence, omission, or faulty advice that I may give to clients as an ACE-certified Professional. I understand that ACE is not responsible for any actions or damages from any person arising out of my work as an ACE-certified Professional.

YES, I have a current CPR certificate.

I am CPR certified by: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

No, I do not have a current CPR certificate. If you answer "No," ACE will not release your exam scores until we have received documentation that you have completed your CPR certification. Documentation consists of faxed or mailed copies of both sides of your CPR card.

\_\_\_\_\_  
AFFIRMATION SIGNATURE

Testing Fees:

\$ 244 for PT first-time candidates (United States Only)  
\$ 225 for GFI first-time candidates (United States Only)  
\$160 for PT and GFI retake candidates

\$204 Club Code / Nirsra Members only

\$25 for transferring to a different examination site on the same date registered

Total fee enclosed: \$ \_\_\_\_\_

Money Order     Cashiers Check

All money orders and cashier checks must be in U.S. currency. Make payable to ACE. Personal checks are not accepted.

ACE-certified Professionals may be required to submit proof of CPR certification upon request. Those submitting proof of CPR with their application will be exempt from future CPR audits, up to the expiration date of the certification.

### **ATTENTION STAND-BY CANDIDATE**

The American Council on Exercise Code of Ethics and Professional Practices and Disciplinary Procedures are presented below. A new policy incorporated into the ACE testing registration requires that all candidates accept and agree to practice the American Council on Exercise Code of Ethics and Professional Practices and Disciplinary Procedures.

#### **ACE-certified Professional Code of Ethics**

As an ACE-certified Professional, I am guided by the American Council of Exercise's principles of professional conduct whether I am working with clients, the public, or other health and fitness professionals. I promise to:

- |   |   |
|---|---|
| Provide safe and effective instruction.   | Comply with all applicable business, employment, and intellectual property laws.  |
| Provide equal and fair treatment to all clients.  | Maintain the confidentiality of all client information.                           |
| Stay up-to-date on the latest health and fitness research and understand its practical application. | Refer clients to more qualified health or medical professionals when appropriate. |
| Uphold and enhance public appreciation and trust for the health and fitness industry.               | Establish and maintain clear professional boundaries.                             |
|   | Maintain current CPR certification and knowledge of first aid services.           |

#### **ACE Professional Practices and Disciplinary Procedures**

The professional practices and disciplinary procedures of the American Council on Exercise (ACE) are intended to assist and inform certificants, candidates for certification, and the public of the ACE Application and Certification Standards relative to professional conduct and disciplinary procedures. ACE may revoke or otherwise take action with regard to the application or certification of an individual in the case of:

1. Ineligibility for certification.
2. Irregularity in connection with any certification examination.
3. Unauthorized possession, use, access, or distribution of certification examinations, score reports, trademarks, logos, answer sheets, certificates, certificant or applicant files, or other confidential or proprietary ACE documents or materials (copyrighted or otherwise).
4. Material misrepresentation or fraud in any statement to ACE or to the public, including, but not limited to, statements made to assist the applicant, certificant, or another to apply for, obtain, or retain certification.
5. Any physical, mental, or emotional condition of either temporary or permanent nature, including, but not limited to, substance abuse, which impairs or has the potential to impair competent and objective professional performance.
6. Negligent and/or intentional misconduct in professional work, including, but not limited to, physical or emotional abuse, disregard for safety, or the unauthorized release of confidential information.
7. The timely conviction, plea of guilty, or plea of nolo contendere in connection with a felony or misdemeanor, which is directly related to public health and/or fitness instruction or education, which impairs competent and objective professional performance. These include, but are not limited to, rape, sexual abuse of a client, actual or threatened use of a weapon of violence, and the prohibited sale, distribution, or possession with intent to distribute of a controlled substance.
8. Failure to meet the requirements for certification or recertification.

ACE has developed a three-tiered disciplinary process of review, hearing, and appeals to ensure fair and unbiased examination of alleged violation(s) of the Application and Certification Standards in order to (1) determine the merit of allegations; and (2) impose appropriate sanctions as necessary to protect the public and the integrity of the certification process. NOTE: As an ACE certification candidate and/or certified professional, you are deemed to be familiar with and comply with the ACE Professional Practices and Disciplinary Procedures.