АСМО

APPLICATION FOR CHALLENGE EXAM

The Applicant must:

Submit proof of approval to write the Challenge Exam •

Name:	
Position held:	
Employer:	
Address:	
Telephone: Business () Residence ()	
E mail:	
<i>Exam Date</i> : Wed., Nov. 28, 2018 <i>Exam Fee:</i> \$250 + HST = \$	
Select one: Intro to Condo Law Admin & H	R
Financial Planning Physical Building Management	
Check payment method: Visa Mastercard Amex Cheque (pay	vable to ACMO)
Print cardholder name:	
Card Number:	
Expiry Date: Signature:	
□ Please send me a receipt – NOTE: Credit card charges appear on your statement as BB&C	
 I, the undersigned, hereby confirm that the foregoing information together with a additional information are true and accurate as of the date hereof. 	any enclosures or

- I understand that the opportunity to write any challenge exam may only be granted once. I • understand that after writing the challenge exam, if I am unsuccessful in obtaining the required passing grade, I shall be required to complete the requisite ACMO course.
- I understand and consent to ACMO sharing whether I passed or failed the challenge exam(s) with • the CMRAO for the purposes of confirming information on my licence application.

Date _____ Signature of Applicant _____

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