

Telephone: 1-888-999-9830 International: (801) 847-3100 www.certiport.com

Parent/Legal Guardian Consent Form

| I am the parent/legal guardian of | (please print) (the |
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| "Certiport Candidate") and I understand that my permis | sion and authorization is required for the |
| collection, use, and disclosure of the Certiport Candidate | e's personal information by Certiport, a |
| business of NCS Pearson, Inc. ("Certiport"). I further un | derstand that the Certiport Candidate will |
| not be permitted to register for or take a Certiport exam | unless I provide my permission by signing |
| this form. | |

I understand and acknowledge that all individuals, including the Certiport Candidate, planning to take a Certiport exam are required to:

- A) Provide to Certiport, personal information, such as his or her, first and last name, street address, e-mail address, and demographic information ("Candidate Information"); and
- B) Agree to all of the terms and conditions contained on the Certiport website at https://certiport.pearsonvue.com/and in Certiport's test registration and delivery system and that these terms and conditions are legally binding.

In my capacity as the parent/legal guardian of the Certiport Candidate, I hereby understand, agree, authorize, and provide my consent, as the case may be:

- 1) To allow the Certiport Candidate to take or retake any Certiport exam(s); and
- 2) That I have had an opportunity to review the Certiport terms and conditions and privacy policy available at https://certiport.pearsonvue.com/, including, but not limited to, those provisions relating to testing; privacy policies; and the collection, processing, use and transmission to the United States of the Certiport Candidate's personally identifiable information and that I and the Certiport Candidate understand and agree to abide by these terms and conditions and policies; and
- 3) To Certiport for the retention and disclosure any of the Candidate's personal information to the Certiport exam sponsor(s), its authorized third parties and service providers, and others as may be necessary to prevent unlawful activities or as required by law; and
- 4) That the Certiport Candidate and I will comply with any of the Certiport testing rules and procedures.

I, the undersigned, certify that I am the parent or legal quardian of the child/legal ward (named above) and that I have the right to make decisions for my child/legal ward that effect his/her wellbeing.

I CERTIFY THAT I AM 18 YEARS OF AGE OR OLDER AND THAT I HAVE READ, FULLY UNDERSTAND AND AGREE TO THE TERMS OF THIS AGREEMENT, AND I SIGN IT VOLUNTARILY WITH FULL KNOWLEDGE OF ITS SIGNIFICANCE.

| Name of Parent/Legal Guardian | |
|------------------------------------|--|
| Signature of Parent/Legal Guardian | |
| Date (MM/DD/YYYY) | |