

## GENERAL PROCTORING RULES

- An IAHSS-approved proctor is required for each CHPA testing session.
- It is the responsibility of the Candidate to find an eligible proctor.
- Approval of an eligible proctor is at the discretion of the Commission on Certification.
- The proctor must agree to monitor the testing and ensure that the examination is administered according to all of the information contained in these guidelines.
- All exams conducted at the IAHSS annual AC&E will be proctored by members of the Commission.
- Proctors for exams conducted at other IAHSS-sponsored events must obtain approval from the Commission.

## PROCTOR QUALIFICATIONS

A proctor must meet at least one of the following criteria:

- Current CHPA and IAHSS member in good standing.
- Human Resources manager, education/training manager, or higher ranking manager outside the Candidate's chain-of-command.
- Administrator or faculty member of an accredited institution of higher education.

A proctor MAY NOT be one of the following:

- Anyone in the candidate's chain of command (i.e. boss) MAY NOT be the proctor.
- A relative MAY NOT be the proctor.
- An instructor of any CHPA study session MAY NOT be the proctor.
- An approved CHPA candidate who has not yet passed the exam MAY NOT be the proctor.

## PROCTOR DUTIES

A proctor must act in an official capacity and execute the following duties:

- Be present during the entire testing time.
- Follow all written instructions provided by IAHSS.
- Confirm the test environment meets the requirements and intent of the Guidelines.
- Identify the Candidate by government-issued photo identification.
- Ensure the questions are not reproduced or retained in any form by anyone.

## CANDIDATE TESTING RESPONSIBILITIES

- The Candidate must attend to any childcare, travel, lodging, and other personal matters before the examination begins.
- A Candidate with a disability, language, or reading concern must contact the Commission on Certification before registering for a testing session to discuss suitable accommodations or alternative test taking methods.
- Examination questions are not to be written, copied, reproduced, or retained in any form by anyone.
- Any deviation from these guidelines and specific instructions provided by the proctor may invalidate the examination.



## Certified Healthcare Protection Administrator (CHPA) Exam Candidate and Proctor Guidelines

### PROCESS / TIMELINE

- The proctor must complete the Proctor Agreement form at least two weeks prior to the anticipated testing date and submit it to the email address listed below:  
Email: nancy@iahss.org
- The password and access instructions will be sent by e-mail to the proctor within three (3) business days of the scheduled exam.
- If it is necessary to change or cancel the examination date, please notify IAHSS 24 hours in advance of the scheduled date. Failure to do so will result in a \$100.00 change fee to the Candidate.
- The day of the test, the proctor will provide the login information to the Candidate.
- The Candidate will learn his/her score at the conclusion of the test.
- Written results will follow via US Mail.



# Certified Healthcare Protection Administrator (CHPA) Exam Candidate and Proctor Guidelines



## Certified Healthcare Protection Administrator (CHPA) Proctor Agreement Form for Online Exam Only

### Candidate:

Name \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_  
Number/Street City State/Zip

Date of CHPA Exam \_\_\_\_\_ Time \_\_\_\_\_  
Must be between 8:00am – 2:00pm Central Time

### Proctor:

Name \_\_\_\_\_

Title \_\_\_\_\_

Organization \_\_\_\_\_

Email \_\_\_\_\_

Telephone \_\_\_\_\_

Proctor Signature \_\_\_\_\_

By signing above the Proctor confirms he/she has read, understood and meets the criteria as set out in the terms of the CHPA Proctor Guidelines. The Proctor also confirms that the exam will be administered in strict accordance with the CHPA Proctor Guidelines. If it is necessary to change or cancel the examination date, please notify IAHSS 24 hours in advance of the scheduled date. Failure to do so will result in a \$100 change fee to the Candidate.

Please send the completed Proctor Agreement Form to IAHSS **at least two (2) weeks prior to the exam date** at the following email address: **nancy@iahss.org**. On behalf of the Commission on Certification, thank you for agreeing to be the online exam Proctor. Please contact us if you have any questions or concerns regarding the CHPA Proctor Guidelines:

**IAHSS**  
**Commission on Certification - CHPA Proctor**  
**8420 W. Bryn Mawr Avenue, Suite 1020**  
**Chicago IL 60631**  
**Tel: 630-529-3913 Fax: 630-529-4139**

### Office Use Only

Date Received \_\_\_\_\_ Reviewed/ Approved by \_\_\_\_\_