**Certification Exam Beta Testing Application**

Thank you for your interest in participating in the IMSA Certification Development Program. As the most notable and recognized certifier in the public safety field, IMSA is embarking on a process to modernize and update their current programs that have served them well for more than 120 years.

To successfully achieve our mission at IMSA it is imperative we have a diverse and broad range of professionals involved in the beta testing process. Please complete the information in the application below and return via email to [dclark@imsasafety.org](mailto:dclark@imsasafety.org) or [dmontes@imsasafety.org](mailto:dmontes@imsasafety.org) ASAP.

Beta testing will be conducted entirely online and is to be concluded **no later than 3/17/23 by 5pm EST**. All participants will be subject to AI proctoring via Integrity Advocate and will need to adhere to the parameters in force for ensuring the integrity of the exam.

Name: **Click or tap here to enter text.**  
  
Email Address: **Click or tap here to enter text.**  
  
Years of Experience in the Public Safety Profession: **Choose from drop down list.**Beta Test Exam Discipline**: Choose ONE from drop down list.**  
Your Level of Expertise in the Discipline: **Choose from drop down list.**

Municipality/Organization of Employer: **Click or tap here to enter text**.  
  
Current Size of Municipality/Organization Staff: **Choose from drop down list**  
Geographic Location: **Choose from drop down list**  
  
Certifications/Licenses Currently Held: **Click or tap here to enter text (separate by comma).**  
  
Have you ever taken an IMSA certification exam?   
 Yes   
 No   
 If yes date of last exposure certification exam? **Click or tap to enter a date.**

Have you ever **moderated or plan to moderate** an IMSA Certification Course for the discipline applying to beta test?  
 Yes   
 No   
 If yes date of last moderated course **Click or tap to enter a date.**

**Thank you for your time and interest in supporting IMSA. Please return this completed form via email to**

[**dclark@imsasafety.org**](mailto:dclark@imsasafety.org) **or dmontes@imsasafety.org**