

CANDIDATE APPLICATION

FOR RECERTIFICATION

Crane U, Inc.
 Birmingham, AL
 855-927-2638
 www.craneu.com



All fields marked with an asterisk (*) must be completed.

FULL LEGAL NAME		FIRST*	Middle	LAST*	Suffix (Jr., Sr., III)
<small>(as shown on driver's license)</small>					
CCO CERTIFICATION NUMBER		DATE OF BIRTH		CANDIDATE ID: <small>(if previously tested)</small>	
PERSONAL MAILING ADDRESS*			CITY*	STATE*	ZIP*
HOME PHONE	CELL PHONE*		CANDIDATE EMAIL* (PERSONAL EMAIL UNIQUE TO CANDIDATE)		
COURSE DATES				T-SHIRT SIZE (sm, md, lg, xl, 2x, 3x)	
COMPANY/ORGANIZATION		PHONE	REFERRED BY		

EXAM(S) FOR WHICH YOU ARE APPLYING

NOTE: This application is for recertification only. You may only recertify for the designation(s) in which you are currently certified. You may mark additional exam(s) you would like to add to your certification. **MARK** the crane type(s) for which you are applying.

WRITTEN EXAMS*

- Mobile Core Exam
- Lattice Boom Crawler (LBC)
- Lattice Boom Truck (LBT)
- Telescopic Boom--Swing Cab (TLL)
- Telescopic Boom--Fixed Cab (TSS)
- Service Truck
- Tower Crane
- Articulating Boom Crane
- Digger Derrick
- Rigger I
- Signalperson

ADDITIONAL EXAMS*

- Lattice Boom Crane
- Telescopic Boom—Swing Cab (TLL)
- Telescopic Boom—Fixed Cab (TSS)
- Service Truck
- Tower Crane
- Articulating Boom Crane
- Digger Derrick
- Rigger I
- Signalperson

Do you have 1,000 hours of documented crane-related experience during your current certification period?*

- Yes, and I understand that NCCCO may, at any time, request documentation to be provided in order to verify my experience, and if such documentation is not provided my certification may be impacted.
- No, and I understand I must take and pass the practical exam(s) prior to my expiration date.

Applications for paper/pencil written exams are due two weeks before testing date. Late applications will be accepted with \$50 late fee up to 5 business days prior to testing date. I am confirming that the information given in this application is complete to the best of my knowledge. I understand that initial scheduling deposit is non-refundable and will be used as credit toward my total balance. Any changes to exams after registration may result in additional fees owed.

CANDIDATE SIGNATURE*

DATE*

METHOD OF PAYMENT FOR CANDIDATE FEES

- I have a company account with Crane U and will be billed by invoice.
- I would like to set up an account with Crane U to be billed by invoice.
- I am paying by credit card, check or cash.

If paying by credit card, complete the following information:

Visa Amex MasterCard

Deposit (\$250)

Authorization to charge this card in the amount of:

Total Fees

\$ _____

CREDIT CARD NUMBER

EXPIRATION DATE

NAME (Print as it appears on card)

SIGNATURE (on card)

SEC CODE

Email Receipt to:



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