



Remedial Training Plan Form

Effective Date: 6-15-16

Directions:

1. This form is for all applicants who are preparing to take the CWPI or CWCM exam for the third time (second retest).
2. The applicant's training entity designee completes this form.
3. The training entity Point of Contact will collect completed forms and any required supporting documentation, review for completeness, and scan/email all documents to the FCB certification specialist assigned to their region AT LEAST 3 business days before the requested exam date. *Note: Contact the FCB if you do not know the email address of the certification specialist assigned to your region.*

Part 1: Applicant Information. Enter your name exactly as it is associated with your FCB account.

Full Name

Email Address

Part 2: Remedial Training Plan Information.

Please provide a summary of the training that will be provided to the applicant BEFORE he or she takes the exam for a third time. Attach additional pages if necessary.

Part 3: Remedial Training Plan Attestation

Name of Individual Completing Form

Title

Work Email Address

Work Phone

I have read and understand the Remedial Training Plan requirements pursuant 65C-33.010 (7) (a-b) F.A.C. and attest that the employing agency has agreed to ensure the applicant completes the Remedial Training Plan BEFORE taking the exam for a third time. Yes No

Documentation of the applicant's Remedial Waiver Training Plan, including completion of all requirements will be maintained by the employing agency. Yes No

I consent to an audit of agency records if requested to verify my attestation. Yes No

By my signature, I attest that the above material is true to the best of my knowledge.

Signature (FCB accepts both manual and electronic signatures)

Date