ILLINOIS EMERGENCY MANAGEMENT AGENCY RDNREG
DIVISION OF NUCLEAR SAFETY 0430

Application for Radon Licensing Exam

This state agency is requesting disclosure of information that is necessary to establish compliance with 32 Illinois Administrative Code 422. Disclosure of this information is REQUIRED. Failure to provide any information may result in denial of entry into the licensing exam.

License Exam Type: ☐ Measurement Exam ☐ Mitigation Exam

Prefix (Mr., Mrs., Ms.): _____

Applicant Name: _____
First MI Last

Home Address: _____

City, State, Zip: _____

Home Phone: _____

Social Security #: _____

Date of Birth: _____

Business Information:

Business Name: _____

Address: _____

City: _____

State, Zip: _____

FEIN: _____

Phone: _____

Fax: _____

E-mail: _____

Web address: _____

2012 EXAM DATES PER LOCATION (Check One)

Springfield Dates (By Appointment)	Des Plaines Dates (Thursdays)
Test dates and times are to be set by applicant with the Radon Program during the following days and times, at least one week in advance. Mondays-Thursdays, 9am-1pm. Please allow 2 hours for the exam. Exam can only be taken once every 28 days. Please call (800) 325-1245 to set up an appointment.	[ ] January 12 [ ] March 15 [ ] May 17 [ ] July 19 [ ] September 13 [ ] November 15

SPECIAL REQUIREMENTS

Do you have a physical or mental disability that requires reasonable accommodation in accordance with the Americans with Disabilities Act? [ ] Yes [ ] No

If yes, 30 days prior to the exam date provide a physician's statement of the disability that includes a list of the accommodation(s) that are needed to take the exam.

EXAM APPLICATION DEADLINE

For security reasons, IEMA must receive your complete application before 12:00 p.m. on the Thursday prior to the exam. For instance, if the exam date is May 17, your complete application must be received no later than 12:00 p.m. May 10. Late arrivals will be scheduled for the following month's exam. Applications can also be faxed to (217) 524-1254.

CERTIFICATION / AGREEMENT

I agree to abide by all the rules and regulations of the Illinois Emergency Management Agency related to the exam.
I have enclosed copy of my measurement / mitigation course completion certificate.

_____ _____
Applicant Signature Date

BEFORE YOU MAIL OR FAX YOUR APPLICATION
1. Have all questions on the application been answered?
2. Is your application signed?
3. Have you included the appropriate documents?

Omission of any one of the required documents or incomplete information may result in a delay of your exam admission ticket being processed.

Printed by Authority of the State of Illinois (Rvsd. 3-05)

SEND TO: Illinois Emergency Management Agency
Division of Nuclear Safety – Radon Program
1035 Outer Park Drive
Springfield, IL 62704

FAX YOUR APPLICATION TO: (217) 524 - 1254

If you have any questions please call: (217) 782-1325
Website Address - URL: http://www.radon.illinois.gov