



National Certification Commission for Addiction Professionals (NCC AP)  
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Fax: 703.741.7698  
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www.naadac.org/certification

**Special Accommodations Request**  
**35 calendar day notice required**

NCC AP is happy to accommodate any special needs you may have for taking your certification examination. Please fill out the following form and return it to us via mail, e-mail or fax. **You must also include a physician's note or other documentation explaining why you need special accommodations.** The form must be received 35 calendar days before your requested testing date. A representative from NCC AP will contact you to register you for the exam. You cannot register online for a special accommodations examination. Questions 1 through 7 are required to be completed below.

1. Test Center Name:

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2. Examination Name:

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3. Test Taker Name:

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4. 1<sup>st</sup> Requested Date and Time:

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5. 2<sup>nd</sup> Requested Date and Time:

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6. 3<sup>rd</sup> Requested Date and Time:

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7. Type of Special Accommodation needed:

Reader

Reader and Recorder

Translator

Sign Language Interpreter

Screen Magnification software

Private Room

Food/Drink/Medical Equipment required during test session - (describe the specific items needed in the additional information section below)

Attendance of Service Animal

Extended Exam Time included

Other - (please describe in the additional information section below)

Additional information:

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