



Academic Credential Verification Form (ACVF)

This form should be completed by U.S. graduates taking the NBCOT Certification Examination for the first time. This form should not be submitted until your Certification Examination Application has been filed with NBCOT.

Important Note: You may complete this form in order to continue the examination process; however, upon passing the examination, you will not be considered certified until your Official Final Transcript is received by NBCOT. Your examination score will be held, pending receipt of the transcript.

NBCOT Exam Candidate: Please fill out this section, then forward to your school's registrar for completion.

Please list your name exactly as it appears on your NBCOT Certification Examination Application.

First Name:

Daytime Phone:

Middle Name:

E-mail:

Last Name:

School Code:

Date of Birth:

Student ID Number:

Social Security Number:

Exam Level: OTR® COTA®

I declare that the information provided by me on this form is correct. *Please sign in ink.*

Signature:

Date:

Registrar: Please complete and return this form in a sealed envelope (see address below). NBCOT appreciates your cooperation.

Name of Institution:

Individual's Major:

Occupational Therapy Occupational Therapy Assistant Other (specify):

The individual has been or will be awarded the following (select only one):

- Undergraduate Certificate
- Comprehensive Certificate (from undergraduate program)
- Associate Degree
- Baccalaureate Degree
- Post-Baccalaureate Certificate
- Masters Degree (Entry-level Occupational Therapy Masters Degree)
- Certificate in Partial Fulfillment of the Masters Degree
- Combined Baccalaureate/Masters Degree
- Doctorate in Occupational Therapy

Anticipated Graduation Date:

Note: In addition to this completed form, an Official Final Transcript must be submitted by the registrar as soon as it is available.

I certify that as of this date of my signature below, the individual identified above has been awarded the degree/certificate indicated below, OR is "cleared for graduation"—that is, graduation is "certain", having met ALL requirements for the degree/certificate, including any thesis requirements. ALL grades required for completion of the academic credential are known, and there are no outstanding financial obligations to this institution.

Signature:

Date:

Print Name and Title:

Official Stamp/Seal