

ABB ANDROLOGY LABORATORY DIRECTOR CERTIFICATION APPLICATION FORM

If you are interested in becoming certified as an Andrology Laboratory Director (ALD), please complete this application form and return it to the ABB office.

- YES**, I am currently certified as a High-complexity Clinical Laboratory Director (HCLD).
 YES, I have passed the ABB examination in Andrology.

If you do not meet the above requirements you will not be eligible for ALD certification.

- YES**, I would like to be certified as an Andrology Laboratory Director (ALD).

Name (please print) _____

Mailing Address (Please check [✓] preferred mailing address in box provided):

Work:
 Company _____
 Street Address _____
 City _____ State _____ Zip _____
 Country _____
 Telephone (____) _____
 Fax (____) _____
 E-mail _____
 Web Site _____

Home:
 Street Address _____
 City _____ State _____ Zip _____
 Country _____
 Telephone (____) _____
 Fax (____) _____
 E-mail _____
 Web Site _____

To be certified as an Andrology Laboratory Director (ALD) requires the payment of a \$85 "Certification Fee."

- Required Payment: \$85 "Certification Fee"**

Method of Payment: Check or Money order made **payable to ABB.** Credit Card

Charge my: American Express Mastercard Visa Discover

Account No. _____ Security Code _____ Exp. Date _____ / _____
MO. YR.

Cardholder Name (print) _____ Signature _____

Applicant Signature _____ Date _____

Office Use Only: <input type="checkbox"/> HCLD certified. <input type="checkbox"/> Passed Andrology examination.	Verified by: _____ Date: _____
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