



# WASHINGTON

State Department of Health  
Certified Home Care Aide

## Candidate Information Bulletin

Effective July 1, 2018

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**Providing License Examinations for the State of Washington**

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# Introduction

## A Message from the DOH and Prometric

Washington state law requires certain long-term care workers to get a home care aide certification. The Washington State Department of Health (DOH) is responsible for overseeing the exam administration and issuing certifications to those who pass the exam.

The DOH contracted with Prometric Inc., to administer the Washington State Home Care Aide (HCA) Certification examination. This bulletin describes the procedures for registering and taking the HCA exam.

## MAY 1, 2016: NEW APPLICATION AND EXAM

### APPLICANTS MUST PROVIDE AN EMAIL ADDRESS TO BE SCHEDULED FOR THE EXAM.

The written and oral exams have been combined into one Knowledge exam; all applicants can hear an oral exam when they test. The Knowledge exam is mostly true/false questions with some pictures and short animations.

The separate DOH certification application and Prometric exam applications are combined into one application form. First time testers will now send their applications and payments to the Washington State Department of Health (DOH), who will notify Prometric when an applicant is eligible to test. To access the DOH website and application click [here](#).

All re-testers will contact Prometric directly for test scheduling.

## At a Glance



Follow these steps if you want to take the HCA exam:

### To take a HCA exam and receive your certification

- 1 Send a complete **Home Care Aide Exam Application** form to the DOH.
- 2 Use the content outlines in this guide to prepare for your exam. (Page 5)
- 3 Take the scheduled exam. Make sure you bring the necessary identification to the test site. (Page 7)
- 4 If you pass the exam and meet all other licensing requirements, the DOH will provide you with your certification.
- 5 If you fail any of the required exams, contact Prometric to reschedule your exam.

### To get answers not provided in this bulletin

Contact Prometric for all questions and requests for information about the examination process:

#### Prometric

7941 Corporate Drive  
Nottingham, MD 21236

Phone: 800.324.4689

E-mail: [WAHCA@prometric.com](mailto:WAHCA@prometric.com)

Website: [www.prometric.com/wadoh](http://www.prometric.com/wadoh)

Contact the DOH for questions about certification:

**Washington State Department of Health  
Health Systems Quality Assurance Division  
Customer Service Office**

111 Israel Road SE  
P.O. Box 47877  
Olympia, WA 98504-7877  
Phone: 360.236.4700  
Fax: 360.236.2701  
E-mail: [Hmccreview@doh.wa.gov](mailto:Hmccreview@doh.wa.gov)

Website: [www.doh.wa.gov/LicensesPermitsandCertificates/  
ProfessionsNewReneworUpdate/HomeCareAide.aspx](http://www.doh.wa.gov/LicensesPermitsandCertificates/ProfessionsNewReneworUpdate/HomeCareAide.aspx)

## Exam Application Process

This section describes:

- Requirements to be eligible to take the HCA Certification exam.
- Information on how to complete the application form.
- Information on how to reschedule an exam appointment.

**First time testers:** Complete the **application** and return to DOH per application instructions. The DOH will notify both you and Prometric when you are approved to take the examination.

**Re-testers:** You will contact Prometric directly to reschedule your exam. If paying by credit card, you may call Prometric, provide your candidate information, and submit your payment over the phone. If paying by cashier's check or money order, you must submit an application (found at the end of this document) along with the check.

### Testing Locations

There are two possible locations where candidates may take the exam. If the Training Program where you took your training has signed up to be an in-facility test site, you will take the exam there. If not, you will take the exam at a regional test center.

#### **In-facility test site**

If your training program offers in-facility testing, they will provide you their test site code.

#### **Regional test site**

If you cannot take the exam at your training program location, you may take it at a regional test site. Be sure to list the site code where you would like to take your exam on the DOH application form.

A list of current regional test site locations is available online at [www.prometric.com/wadoh](http://www.prometric.com/wadoh).



**Important** Regional test site locations are subject to change. If you need to verify a location, please call 800.324.4689.

## Admission to Test letter

Once Prometric has scheduled your exam, you will receive an Admission to Test letter **via email**. This letter will list the time, date and specific location of your exam appointment. If the scheduled exam date will not work for you, call 800.324.4689 **immediately** to have your exam rescheduled.

## Fee information

If you are a first time tester, please click **here** for information on payments.

### For re-testers only:

Exam fees are **nonrefundable and nontransferable**. Fees will be returned to you only if you are found ineligible to test. Fees must be included with the application form. **Applications received without proper payment will be returned.**

Fees must be paid in the following manner:

- Prometric accepts only money orders or cashier's checks made payable to Prometric. **Personal checks and cash are not accepted.**
- Payment may also be made by using a valid VISA, MasterCard or American Express credit card. Prometric will verify credit cards before processing registrations. Delays may be encountered if credit cards cannot be verified. The request for approval of credit card payments will be processed once; if declined, another form of payment will be required.

**Refund policy.** If you are found to be ineligible to retest, your exam fee will be returned.

## Special Test Accommodations

Reasonable testing accommodations are provided to allow candidates with documented disabilities recognized under the Americans with Disabilities Act (ADA) an opportunity to demonstrate their skills and knowledge.

Thirty days' advance notice is required for all special testing arrangements. You will be notified before testing is scheduled as to the outcome of the review. There is no additional charge for these accommodations.

**English as a Second Language (ESL) accommodation.** If English is your second language, a language barrier is not considered a disability. However, you can choose to take the exams in Russian, Spanish, Ukrainian, Vietnamese, Korean, Simplified Chinese, Somali, Samoan, Khmer, Tagalog, Arabic, or Laotian. This option **must** be marked on the application form prior to the scheduled day exam. You **cannot** request to take the exam in another language on the day of testing.

If you would like to take the exam in a language not listed above, please complete the test accommodations form and specify the language in which you would like to test, and include the dialect, if applicable. Prometric will secure an in-person interpreter to translate both the Knowledge and skills exam.

## Rescheduling an Appointment

To reschedule your appointment, you must contact Prometric at 800.324.4689. Rescheduling fees are as follows:

- **\$25 fee** to reschedule **up to six full working days** before your exam.
- A full exam fee if you reschedule less than five full working days before your exam, or if you are denied admission into a test site.

**If absent or late.** If you miss your appointment or arrive late and are not allowed to test, you will lose your fees and must pay another exam fee to test. If you miss your appointment due to illness or emergency, call Prometric immediately. The rescheduling fee may be waived with proof of your illness or emergency.

**Emergency closing.** Severe weather or an emergency could require cancellation of scheduled exams. If this occurs, Prometric will attempt to contact you by phone and email. You may also call 800.324.4689 to see if a site is closed. If the site is closed, your exam will be rescheduled without a rescheduling fee.

**Re-testing.** You must take and pass both the Skills exam and Knowledge exam. You have up to three attempts within two years of completing training. A fee is required each time you take an exam. You are only required to retake the exam you failed except as noted below.



**Note** If you are unsuccessful at passing both exams after three attempts, you will need to retrain with an approved home care aide training program and then take both exams again.

## Examination Overview

The Washington State Home Care Aide Certification Examination consists of a **Knowledge exam** and a hands-on demonstration referred to as the **Skills exam**.

**You must pass both** the Knowledge and Skills exams within two years of completing your home care aide training program. You have up to three attempts. If you fail either the Knowledge or Skills exams three times, you will be required to retrain and retake both the Knowledge and Skills exam.

### Knowledge Exam

The Knowledge exam consists of 60 multiple-choice questions that test your overall knowledge of home care aide job duties. You will have 90 minutes to complete the exam.

The Knowledge exam is administered on a computer. You do not need computer experience to use this system. You will use a computer mouse to select answers. Sample questions are available [here](#).

Please note that during this test, you will have the choice to hear the questions read to you while reading and answering questions on the computer. You may replay questions as many times as needed during the exam.

## Exam Content Outline

The areas the knowledge exam covers are listed below.

Knowledge Exam Content Outline
<b>60 questions—90-minute time limit</b>

**Note:** Ten questions on this exam are used for statistical purposes only and will not be included in the scoring process.

### Domain I:

#### **Roles and Responsibilities of the Home Care Aide — 38% [19 questions]**

- A. Worker roles and boundaries**
- B. Consumer rights and dignity**
- C. Abuse and mandatory reporting**
- D. Observation and reporting**
- E. Communication skills**
- F. Problem solving**
- G. Worker self-care**

### Domain II:

#### **Supporting Physical and Psychosocial Well-being — 44% [22 questions]**

- A. Support activities of daily living (ADL)**
- B. Skin care**
- C. Nutrition and hydration**
- D. Medication assistance**
- E. Cultural sensitivity**
- F. Health and well-being**
- G. Grief and loss**

### Domain III:

#### **Promoting Safety — 18% [9 questions]**

- A. Infection Control**
- B. Blood borne pathogens and HIV/AIDs**
- C. Fall Prevention**
- D. Food preparation and handling**

## Skills Exam

The Skills exam is a timed exam. You will be scored on five skills. While performing three assigned skills, you will also be scored on two additional skills — Handwashing and Common Care Practices. Common Care Practices are practices that are part of every skill, such as client rights, communication with the client, client safety and comfort, and infection control. To pass the Skills exam, you must pass all five skills.

A Home Care Aide Skills Checklist is available online at [www.prometric.com/wadoh](http://www.prometric.com/wadoh). At the beginning of the Skills exam, the evaluator will give you instructions to perform three skills for a client. The evaluator will tell you how much time you have for your exam based on which skills you are asked to perform. To pass a skill, you are not required to perform the skill perfectly, but you are required to demonstrate competency of the skill. The evaluator will watch you perform the skill and compare your performance to the checkpoints for the skill.

The rules for the Skills exam allow you to make corrections while performing a skill. You must tell the evaluator that you are making a correction during the skill. Once you have completed a skill and have indicated to the evaluator that you are done with the skill, you may not go back to correct a previous skill. You are not given additional time for correcting a skill. Because this is a state certification exam, the evaluator is not permitted to help, teach or give you hints on how to perform skills. The evaluator is also not allowed to discuss your results or performance with you.

### Candidates playing the role of the client

You will use a mannequin if you need to demonstrate perineal care and/or catheter care skills. For the remaining skills, other candidates will play the role of the client. You are expected to play the role of the client for another candidate testing on the same day. The evaluator will read instructions explaining the role of the client actor before the exam begins.

If you have a medical condition that affects your ability to play the role of the client for a skill, such as if you are a diabetic and cannot eat fruit cocktail, please let the evaluator know when you sign in on the day of testing.

Below is a brief description of what will be expected when playing the client.

Skill to be performed	Playing the role of the client, you will
Range of Motion	lay in bed and have exercise provided to one shoulder, knee and ankle.
Foot Care	sit in a chair and have one foot washed, toenails shaped with an emery board, and lotion applied to foot.
Assist to dress	sit in a chair and have a shirt, pants, socks and shoes put on over your clothes.
Feed a client	sit in a chair and be fed fruit cocktail and given water to drink.
Help to walk	have a gait belt placed around your waist and be walked about 20 steps.
Turn and reposition	lay in bed and be turned onto your side, and have padding placed behind your back and between your legs to support your position.
Skill to be performed	Playing the role of the client, you will
Clean and store dentures	be given a denture cup that already has a denture in it. You will hand this cup to the candidate. The denture will not be placed in your mouth.
Put knee-high elastic stocking on client	lay in bed while the candidate puts a knee-high stocking onto one leg.
Transfer from bed to wheelchair	lay in bed and be assisted to sit up on the bed, stand and turn into a wheelchair.
Provide mouth care	sit in a chair and have your teeth brushed.
Provide fingernail and hand care	sit in a chair and have your fingernails soaked, under the nail tips cleaned, and the nails shaped using an emery board. Skin lotion is also applied to the hands.
Help a client to take medication	be given candy that for testing purposes is being used as pretend medication. You are allowed to chew or swallow the candy. Candies used are the same shape and size as medications. You are allowed to inspect the medication bottles before the exam begins.



# Taking your Examination

Knowing what to expect when taking your examination may help you prepare for it. This section contains:

- A list of what to bring to the test site.
- Regulations that will be enforced at the test site.
- A guide to understanding your examination results.
- Information about appeals.

## What to Bring to the Exam

You should arrive at least **30 minutes before** your scheduled exam appointment. This allows time for you to sign in and for staff to verify your identification. You will need to provide all of the following items:

**Admission to Test letter.** You must present the original letter sent to you by Prometric. Copies will not be accepted.

**Identification.** You must present two valid forms of identification before you can test. That identification **must**:

- 1** Be government-issued (e.g., driver's license, state-issued identification card, military identification or passport) that contains:  
**Both** a current photo and your signature; and  
The name that exactly matches the name used to apply for the examination (including designations such as "Jr." and "III").
- 2** The second form of identification must include your name and signature. Examples of acceptable second forms of identification include a library card, hunting license, Social Security card or a credit card. Copies will not be accepted.



**Important** If you do not provide correct identification at the time of the exam, it is considered a missed appointment. You will be required to pay the entire exam fee in order to be scheduled for another exam.

**Important:** Before taking your exam you will be required to answer an attestation question at the computer before the exam is about to be launched. If you do not agree to the attestation question, you will not be allowed to take your exam. You will be asked if you have successfully completed the required training course in order to sit for the exam, or if you are exempt from certification either by prior work as a long term care worker (Route 2) or by having another credential (Route 3). Test site personnel have the right to refuse admission to any candidate when the identification presented:

- Appears to have been falsified or tampered with.
- Has a photo that does not appear to resemble the candidate testing.  
Please make sure your identification has a recent photograph.
- Has a signature that does not match the candidate's.

**Late arrivals.** If you are late for your exam appointment, you will be denied entrance into the test. You will then have to pay another exam fee and schedule a new exam appointment.

**What to wear.** To take the skills exam, you are required to wear socks inside flat, nonskid, closed-toed shoes. It is suggested that you dress as you would for work, wearing clothes that are safe and comfortable for the skills that you will perform. You may be refused entrance into the test if you fail to dress appropriately. If you are not allowed to take your exam, you will lose your exam fees and will have to pay another exam fee and reschedule your exam.



**Note** Since completing both the Skills and Knowledge exams may take several hours, it is recommended that you bring snacks and/or lunch and nonalcoholic beverages. While eating and drinking are not allowed during the exam, you will be directed to areas where you are allowed to eat while waiting to test. Do not depend on vending machines being available at the test site.

## Test Center Regulations

The following regulations will be observed at each test site. If you do not follow these rules, it will result in the disqualification of your exam. Prometric reserves the right to audiotape and videotape any examination session.

### References

- No reference materials, papers or study materials are allowed at the test center. If you are found with these or any other aids, you will not be allowed to continue the test and your answers will not be scored.

### Personal Items

- Prometric is not responsible for personal items brought to the test center. It is recommended that personal items not be brought into the test site. Note the following:
  - Electronic equipment is **not** permitted in the testing area. This includes **cell phones**, pagers, cameras, recording devices, etc. All of these items will be collected by the Nurse Aide Evaluator (NAE).
  - Other personal items—purses, briefcases, etc.—are not permitted in the testing area. **Note:** It is recommended that purses not be brought to the test center. Access to purses will not be allowed during testing.

### Restroom Breaks

#### Restroom Breaks

- If you leave the testing room while an exam is taking place, you must sign out/in on the roster and you will lose exam time.
- You will not have access to any personal items during this break.
- You are not allowed to use any electronic devices or phones during breaks.

### Visitors

#### Misconduct or Disruptive Behavior

#### Visitors

#### Misconduct or disruptive behavior

- No guests, visitors, children or family members are allowed at the test center.
- If you engage in any disruptive or offensive behaviors, you will be dismissed from the examination. If dismissed, your test results will be invalid and the details of the misconduct will be reported to the Board of Nursing. Examples are: giving or receiving help, **cell phones ringing in the test center**, resident actors talking, prompting or moving when not directed to do so, taking part in an act of impersonation, removing test materials or notes from the testing room, using rude or offensive language and behavior that delays or interrupts testing.

### Weapons

- Weapons are not allowed at the test center.



**Important** Every time you enter the test room, you will be asked to turn your pockets inside out to confirm that you have no prohibited items. The test center administrator will collect any materials that violate the rules.

**Copyrighted questions.** All exam questions are the property of the Washington State Department of Health and are protected by copyright. Federal law provides severe civil and criminal penalties for the unauthorized reproduction, distribution, or exhibition of copyrighted materials.

## Your Exam Results

Your results are reported to the DOH regardless of whether or not you have successfully completed both parts of the exam.

### Knowledge exam

Since your exam is administered on computer, you will be given a printed score report immediately after you finish the exam. The score report will list an overall result of either pass or fail. The score report will also give the percentage you got correct in each major section of the exam. **Test site personnel are not permitted to discuss your results or performance with you.**

To pass the Knowledge exam, you must get an overall number of questions correct. It is not necessary to pass each content area. This makes it possible to have a fail in several of the content areas on the Knowledge exam and still have an overall result of pass. Even when you are successful, you are strongly encouraged to focus on those areas that require additional attention as you begin to provide care for the public.

### Skills exam

Your score report will be given to you at the test site shortly after the completion of your exam. The score report will list each skill and whether you passed or failed the skill. You must pass all five skills to pass the Skills exam. If you do not pass your exam, you will receive information about retaking the exam. **The evaluator giving the Skills exam is not allowed to discuss your results or performance with you.**



**Note** Results are confidential and are not given out over the phone. Any questions or comments about your examination should be directed to Prometric at 800.324.4689.

**If there is a printer malfunction at the test site, you may also go online to see your official results. Follow these steps:**

- 1 Log onto <https://ibt.prometric.com/wadoh>.
- 2 Click on secure sign in.
- 3 Enter your Prometric ID as your username and password (this number is on your ATT letter). If you do not have your letter, you can contact customer service to get it.
- 4 In the Main Menu, click on the link that says Review Scores.
- 5 Click on the date of the exam results listed in the history box to obtain your exam score reports.
- 6 To see which checkpoints you missed on your skills exam, click on the link in the score report that says Item Feedback.

## Knowledge Test Review

If you would like to review the questions you answered incorrectly on the Knowledge exam you can do this by sending an application and selecting the \$40 review option. You will be notified of your exam review the same way as you were notified of your exam date. When you arrive at the test site you will be asked to sign in and provide ID the same way you would do as if you are taking the exam. Instead of being given the exam however, you will be given a printout of the test that is only showing you the questions that were missed on your Knowledge exam, the incorrect answers given for those questions, and the

correct answers for those questions. You will have forty-five minutes to review the test. You are not permitted to leave the room with any notes. All security requirements that apply during the test apply to the review session as well. You must wait 30 days following the review session to schedule a retake test.

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## Appeals Process

Our goal is to provide a quality examination and a pleasant testing experience for every candidate. If you are dissatisfied with either and believe we can correct the problem, we would like to hear from you. We provide an opportunity for general comments at the end of your exam. Your comments will be reviewed by our personnel, but you will not receive a direct response.

If you would like to submit an appeal concerning examination content, registration, scheduling or test administration (testing site procedures, equipment, personnel, etc.), please submit an appeal by visiting [www.prometric.com/contactus](http://www.prometric.com/contactus).

The Appeals Committee will review your concern and send you a written response within 20 business days of receipt.

## Washington State Home Care Aide Re-Examination Application – For Re-Testers Only

### Instructions

- Please go to [www.prometric.com/WADOH](http://www.prometric.com/WADOH) to print the current version of this application and all other forms. **DO NOT submit photocopies** as this may impact the ability to process the application. Incomplete, blurred or illegible forms will not be processed.
- This form must be completed and submitted with all required fees so you may be scheduled to retake the Washington State Home Care Aide Certification examination. Candidates can apply before completing the 75 hours of training, if training is required, but will not be scheduled to test until after they have completed training.
- Please mail completed original forms to [Prometric, ATTN: WADOH Home Care Aide Program, 7941 Corporate Drive, Nottingham, MD 21236](mailto:Prometric, ATTN: WADOH Home Care Aide Program, 7941 Corporate Drive, Nottingham, MD 21236).



The name you provide on this application **must** match **EXACTLY** the name on your government-issued identification you will provide on the day of testing. If the name does not match **EXACTLY**, you **will not** be permitted to take your exam and **will forfeit** any test fees.

If you have previously taken a Home Care Aide exam with Prometric and your legal name has changed since then, you **must** provide a **copy** of acceptable legal documentation along with this application. Acceptable documents include marriage certificate; divorce decree; birth certificate; and legal name change court documents. Prometric will be unable to process your application until the legal acceptable documents are received.

- **If applying for Testing Accommodations under the Americans with Disabilities Act (ADA):**
  - Please go to [www.prometric.com/WADOH](http://www.prometric.com/WADOH) to print the required ADA Accommodations Request Packet. This packet **MUST** be completed and submitted with this application.
  - **Complete and submit the ADA Accommodations Request Packet with this application.**
  - Fill out the box below.

**Note:** Candidates applying to take the Oral (audio) Exam do not need to apply for ADA accommodations, as this offering is available to all candidates.

I am applying for **Americans with Disabilities Act (ADA) accommodations**. I am requesting testing accommodations and have included the **required ADA Accommodations Request Packet** along with this application. I understand I must request accommodations **30 days in advance of the test date** and not **all** accommodations can be approved.

**Yes**                       **No**

### Candidate Information

All fields marked with \* are required. Print one number/letter in each box where required.

*Have you taken a Certified Home Care Aide exam with Prometric? <input type="checkbox"/> Yes <input type="checkbox"/> No	
*First Name	Middle Initial
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>
*Last Name	
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	

*Date of Birth (Month/Day/Year) □ □ / □ □ / □ □ □ □		Previous name (if applicable):	
*Street Address (including Apt. number or P.O. Box, if applicable)			
*City		*State □ □	*ZIP Code □ □ □ □ □
*County (first four letters only)		*Daytime Phone Number (including area code) □ □ □ - □ □ □ - □ □ □ □	
*Email Address (application will not be processed without an email address)			

### Training Information

This section is optional for candidates who have selected **Certification Route 1**.

Name of School or Facility listed on your training certificate <b>OPTIONAL</b>	
Address of School or Facility on your training certificate (Street Address or P.O. Box)	
City	State □ □ ZIP Code □ □ □ □ □
Training Instructor Code <b>OPTIONAL</b>	Training Program Code <b>OPTIONAL</b>
Anticipated Training Completion Date: <b>Mandatory for all candidates applying using Route 1</b> □ □ / □ □ / □ □ □ □	

### Test Site Information

Please check one of the following options.

✓	<b>Test Site</b>
	<b>Testing at your Facility:</b> My training program or employer is scheduling my exam and I will take the exam at their facility. I will give this application form to the facility coordinator. <b>Do not send to Prometric.</b>
	<b>Regional Test Site:</b> I am applying to test at a Regional Test Site. My preferred test site code is listed. <i>A current list of Test Sites with codes can be found online at <a href="http://www.prometric.com/wadoh">www.prometric.com/wadoh</a>.</i>
	*Test site code:

## Exam Selection and Processing/Exam Fees

- **Acceptable Forms of Fee(s) Payment:** certified check, money order, MasterCard, Visa or American Express. Make certified checks payable to Prometric. **Personal checks and cash are not accepted.** Fees are **non-refundable and non-transferrable.**
- The **Payment Form** (last page) **must** be submitted with this application **regardless of payment type.**

✓	Re-tester	Fee	
	Skills and Knowledge Exam	\$137	\$
	Skills Exam ONLY	\$92	\$
	Knowledge Exam ONLY	\$45	\$
✓	Other	Fee	
	Rescheduling/No Show <sup>2</sup>	\$25	\$
	Duplicate Score Report	\$10	\$
			\$
		<b>Total Fee</b>	

<sup>2</sup> A rescheduling/no show fee is required to reschedule an exam appointment with less than five business days notice, no-shows, late arrivals, or not allowed to test. Reschedule fees may apply to roster changes made by IFT testing locations.

If you would like to take an exam in a language other than English, please indicate below.	
<b>Written Exam:</b>	<input type="checkbox"/> Korean <input type="checkbox"/> Russian <input type="checkbox"/> Simplified Chinese <input type="checkbox"/> Spanish <input type="checkbox"/> Vietnamese <input type="checkbox"/> Khmer <input type="checkbox"/> Ukrainian <input type="checkbox"/> Arabic <input type="checkbox"/> Samoan <input type="checkbox"/> Somali <input type="checkbox"/> Tagalog <input type="checkbox"/> Laotian <input type="checkbox"/> Amharic <input type="checkbox"/> Other (1 on 1 Interpreter) Please also complete Test Accommodations Form
<b>Skills Evaluation:</b>	<input type="checkbox"/> Korean <input type="checkbox"/> Russian <input type="checkbox"/> Cantonese <input type="checkbox"/> Spanish <input type="checkbox"/> Vietnamese <input type="checkbox"/> Khmer <input type="checkbox"/> Ukrainian <input type="checkbox"/> Arabic <input type="checkbox"/> Samoan <input type="checkbox"/> Somali <input type="checkbox"/> Tagalog <input type="checkbox"/> Laotian <input type="checkbox"/> Amharic <input type="checkbox"/> Other (1 on 1 Interpreter) Please also complete Test Accommodations Form

## Applicant's Affidavit and Candidate Release Statement

- I understand I am responsible for making sure all information provided in this application is completely true and correct.
- I understand if any information given is not true, my registration status as a nursing assistant may be at risk.
- I understand I must pass both parts of the Washington Home Care Aide Certification exam and meet all other WA state requirements, to receive my certification.
- I understand I may be asked to play the part of the resident for another candidate on exam day. I do not have any physical, medical or other condition that would be affected in any way by my participation in the exam. I agree that I am responsible for my own personal safety both while taking the exam and acting as a resident. I hereby release Prometric, the DHS and OLTC, and their agents and assigns from any responsibility or liability for any claim or damage that may result from my participation in the examination.
- I understand all information required on the registration application may be made available for public disclosure (except for Social Security Number).
- I agree I am responsible for my own personal safety both while taking the exam and acting as a client. I hereby release Prometric, the Washington State Department of Health, and their agents and assigns from any responsibility or liability for any claim or damage that may result from my participation in the examination.

**\*Candidate Signature (in box below)**

**Date:** \_\_\_\_\_

If you **DO NOT** receive your emailed ATT letter from Prometric within **10-14 business days** of receipt at Prometric, please contact Prometric.

**Questions:** For additional information, please visit our website at [www.prometric.com/WADOH](http://www.prometric.com/WADOH)

Please make a copy of all completed forms for your personal records.



# Payment Form

\*Candidate Name: \_\_\_\_\_

\*Date of Birth: \_\_\_\_\_



**Credit Card Type (Check One)**

MasterCard     Visa     American Express

Card Number	Expiration Date □ □ / □ □
Amount \$ _____ . _____	C/C Security Code □ □ □ □
Name of Cardholder (Print)	
Signature of Cardholder	

**Certified Check or Money Order Payments**

Personal checks are not accepted and money orders must be 30 days recent.

Certified Check                       3<sup>rd</sup> Party/Facility Check                       Money Order

Certified Check/Money Order/3 <sup>rd</sup> Party/Facility Check Number (one number or letter in each box):
□ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □

Please mail completed forms, all supporting documentation and fees/letters of Intent to Hire to:

[Prometric](#)  
[ATTN: WA Home Care Aide Program](#)  
[7941 Corporate Drive](#)  
[Nottingham, MD 21236](#)