



# IEEE CS Exam Retesting Application Form

Standard Exam Retesting Fee: \$125

Exam Name: \_\_\_\_\_

## **\*Required Information**

IEEE/IEEE Computer Society Membership Number: \_\_\_\_\_

Mr./Mrs./Ms./Dr./Prof.: \_\_\_\_\_ \*First: \_\_\_\_\_ Middle: \_\_\_\_\_ \*Last: \_\_\_\_\_

Company Name: \_\_\_\_\_ Title: \_\_\_\_\_

\*Home Address: \_\_\_\_\_

\*City, State/Province: \_\_\_\_\_ \*Zip/Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

\*Home Telephone: \_\_\_\_\_ Work Telephone: \_\_\_\_\_

\*Email address: \_\_\_\_\_

## **\*Payment information**

We accept the following payment types: Visa, MasterCard, American Express, and Wire Transfer.

NOTE: If you prefer to pay by wire transfer, please email [certification@computer.org](mailto:certification@computer.org) with this application attached.

Visa

MasterCard

American Express

Wire Transfer

Cardholder's Name

Account Number

Card Expiration

Billing Address

same as above (check box)

City, State/Province

Zip/Postal Code

Country

Please send the completed application  
with the appropriate fees to:

IEEE Computer Society  
10662 Los Vaqueros Circle  
Los Alamitos, CA 90720 -3014

or

email: [certification@computer.org](mailto:certification@computer.org)

\_\_\_\_\_  
*\*Signature Required*

\_\_\_\_\_  
Date