

PTI Certification Retest Registration Form

Name: _____

Company: _____

Address: _____

City, State, Zip (Postal) Code: _____

Country: _____

Phone Number: _____

Email Address: _____

Type of Retest

Note: all retest exams are \$125

Unbonded

- Level 1 Installation
- Level 1&2 Installer
- Level 1&2 Inspector
- Level 1&2 Slab-on-Ground Installer & Inspector
- Level 1&2 Repair, Rehabilitation, & Strengthening

Multistrand & Grouted

- Level 1&2 Specialist (previously Bonded)
- Level 1&2 Inspector

Preferred location and date of retest: _____

Form of Payment

Visa__ MasterCard__ Discover__ American Express__

Credit Card Number: _____ CCV: _____

Expiration Date: _____ Name on Card: _____

Billing Address: _____

Please return to Michelle Stern via email (michelle.stern@post-tensioning.org), fax (248-848-3181), or mail (Post-Tensioning Institute, 38800 Country Club Drive, Farmington Hills, MI 48331).