

# Lamaze Childbirth Educator Certification Exam

## Instructions:

1. **Applicant**: Fill in Page 2 of the Proctor Affidavit AND sign Page 3
2. **Proctor**: Complete and sign PAGE 3. ***Please list a current and valid email address where we can reach you.***
3. Once you have completed the form please save and upload back into your Exam application

## Lamaze Childbirth Educator Certification Exam Proctor Affidavit

This is to certify that \_\_\_\_\_ ("**Applicant**") is currently registered to take the **Lamaze Childbirth Educator Certification Exam**, and is required to identify a person who will serve as their "Proctor" for purposes of completing the computerized **Lamaze International Childbirth Educator** test.

Spouses, family members, and persons employed by the Applicant are not eligible to serve as Proctors. The Proctor should not be a licensed child birth educator, and will preferably have some experience administering exams.

### Proctor Responsibilities:

1. Agree to be available for the duration of the examination (3 hours).
2. Verify that Applicants' computer workstation is comfortable and affords the Applicant privacy and confidentiality.
3. Assure that no other person uses the workstation or communicates with Applicant during the examination. Upon completion of the examination, Applicant will be responsible for uploading their answer file. (An automated process that only requires Internet connectivity).
4. Verify the identity of **the Applicant** by confirming ONE of the following forms of photo identification:

a. **Driver's License:** \_\_\_\_\_  
STATE DRIVER'S LICENSE NUMBER

b. **Government Issued Photo Identification:** \_\_\_\_\_  
ID TYPE  
ID NUMBER

5. Will exercise reasonable diligence in keeping all information about the **Lamaze Childbirth Educator Certification Exam**, administration of the **Lamaze Childbirth Educator Certification Exam**, and information about Applicant, confidential.
6. Will certify, by affixing their signature in the "Proctor Signature" section, that Applicant did not use any books, journals, notes, or electronic devices during the examination. Penalty to Applicant for use of any of the above is a score of a zero (0) on the exam being administered. **Lamaze International** enforces a "zero-tolerance" policy relative to "cribbing" or "cheating". Signing this form affirms that you agree to the following paragraph:

I agree to serve as a Proctor for the individual listed above and assure that I will not allow the individual to use any books, journals, notes, or electronic devices during the administration of the exam. I understand that the candidate(s) will have to show documentation of approval from Lamaze International to use a non-medical translation dictionary. Further, I will assure that no items from the examination will be recorded, photographed, or electronically stored. I understand that the examination software is encrypted to detect attempts to copy, print, or forward any examination material and I will remind Applicant of this prior to their beginning the examination.

7. I understand that all information and material related to the **Lamaze Childbirth Educator Certification Exam** is confidential and I agree to maintain the security and confidentiality of the written work and all of the information related to the exam.
8. Agree to receive the proprietary Password which will activate the examination via telephone or email by Lamaze International and relay the Password to Applicant.
9. Following completion of the examination, the Proctor agrees to monitor the transmission of the completed examination to Lamaze International.
10. Agrees to indemnify, defend, and hold Lamaze Childbirth Educator Certification Exam harmless from and against any and all loss, damage, liability, and expense, arising out of any third party claim, action, or proceeding based directly or indirectly, on the activities of the Proctor in the administration of the Certification Exam.

## Lamaze International Proctor Form Signature Page

**PROCTOR SIGNATURE:** I agree to serve as a Proctor and will perform the responsibilities listed above. I am not related to, nor an employee of Applicant.

Name of Proctor: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

Date/Time of Exam: \_\_\_\_\_

PROCTOR'S SIGNATURE: \_\_\_\_\_

Date of Signature: \_\_\_\_\_

**PROCTOR'S EMAIL:** \_\_\_\_\_

**APPLICANT SIGNATURE:** I agree to assist the Proctor with each of the responsibilities listed above and understand that **Lamaze International** practices a "zero-tolerance" policy related to "cribbing" or "cheating". I understand the exam software is encrypted and can automatically terminate if it detects attempts to cheat. I will not copy, or cause to be copied, any portion of the exam. I will not take any materials into the examination workstation. Upon completion of the exam, I will upload the answer file as requested. Finally, the Proctor, who is not related to me, is not an employee of mine, has met all the responsibilities listed above, in a professional manner.

I hereby affirm that the examination was administered in compliance with the aforementioned requirements and responsibilities.

APPLICANT'S SIGNATURE: \_\_\_\_\_

DATE OF SIGNATURE: \_\_\_\_\_

APPLICANT'S EMAIL: \_\_\_\_\_

If you have any questions, please contact **Lamaze International at 202-367-1128** or via email [certification@lamaze.org](mailto:certification@lamaze.org).