



A conjoint Board of The American Board of Internal Medicine and The American Board of Pediatrics  
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## **APPLICATION AGREEMENT FOR THE CONTINUOUS ASSESSMENT PROGRAM (CAP) PILOT QUALIFICATION EXAMINATION**

I hereby apply to the American Board of Allergy and Immunology, A Conjoint Board of the American Board of Internal Medicine and the American Board of Pediatrics (the "Board"), for examination of my qualifications for recertification by the Board as a specialist in allergy and immunology, all in accordance with and subject to the Board's Policies and Procedures. I enclose the registration and examination fees to cover the review of my credentials and the examination, of which all but the registration fee will be refunded if this application is disapproved. I agree to accept and abide by disqualification from examination, re-examination, or from the issuance of a Certificate of Diplomacy, and to return to the Board any such certificate in the event that the Board shall determine that any of the statements made by me in connection with this application for examination are false in any material respect, or that I violated any of the rules and regulations governing such examinations, or that I violated any of the provisions of the Articles of Incorporation, or bylaws, and/or the Policies and Procedures of the Board

I understand that irregularities by me during the proctored examination, including but not necessarily limited to, giving or obtaining unauthorized information or aid, as evidenced by observation, may be sufficient cause for the Board to terminate my participation, to invalidate the results of my examination, or to take other appropriate action within its sole discretion. In addition, I understand that any such irregularities that are discerned through subsequent statistical analysis of answers may be sufficient cause for the Board to invalidate the results of my examination or to take other appropriate action within its sole discretion.

I hereby authorize the Board to transmit the information contained in this application, or information which may otherwise become available to the Board with respect thereto (including but not necessarily limited to the results of the examination as to which I am applying for admission), to any other organization or individual which in the opinion of the Board has legitimate interest in such information. I agree that the examination is the sole property of the Board, and that the examination will not be available for review by examinees either before or after the examination.

In consideration of the Board's acceptance of this Application for Examination, I hereby release the Board, its members, examiners, officers, and agents from any and all liability to me which, but for this release, might arise out of, or in connection with, this Application, the related examination, the grade or grades given me with respect to such examination, the termination of my participation in the examination, the invalidation of the results of the examination, the issuance to me of a Certificate of Diplomacy, or any failure of the Board to issue to me a Certificate of Diplomacy. I agree to indemnify the Board, its members, examiners, officers and agents and hold them harmless from any loss, damage, cost, or expense, (including attorneys' fees), in any suit or complaint, threatened or filed, in law or in equity and arising out of, or in connection with, this Application, the related examination, the grade or grades given me with respect to such examination, the termination of my participation in the examination, the invalidation of the results of the examination, the issuance to me of a Certificate of Diplomacy, or any failure of the Board to issue to me a Certificate of Diplomacy.

I hereby certify that the information given in this application is true and accurate to the best of my knowledge and belief.

Signature \_\_\_\_\_

Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Name (printed) \_\_\_\_\_

Candidate ID \_\_\_\_\_