

**PTA GLOBAL EXCEPTION/APPEAL REQUEST FORM  
(TO BE COMPLETED BY THE PERSON MAKING THE REQUEST)**

Name:	
Current Street Address:	
City/State/Zip:	
Best Phone Number:	
Email:	
Exam Associated with this request:	
Date:	

**Details of the Request/Appeal**

Describe your request in detail (attach additional sheets of paper if additional space is needed)

I understand that this exception request/appeal form will be reviewed by the appropriate Disciplinary and Appeals Committee and I will receive a letter from PTAG informing me of the committee's decision. I also understand that PTAG's policies regarding exception requests and appeal processes are provided in detail in the Exam Candidate Handbook

\_\_\_\_\_

Signature of person making the request/appeal

\_\_\_\_\_

Date

Please attach all documentation supporting your request/appeal that you want the Disciplinary and Appeals Committee to consider. Email the completed form and all attached documentation to [certificationboard@ptaglobal.com](mailto:certificationboard@ptaglobal.com)