



## **INSTRUCTIONS for International Board of Chiropractic Examiners® (IBCE®) Portuguese Special Purposes Examination for Chiropractic (SPEC)**

Registration for the Portuguese SPEC will be processed upon receipt of a current, properly completed and signed application with appropriate payment. The application must also include an original verification signature from the Associação Portuguesa dos Quiropráticos (APQ). **Improperly completed applications will be returned. Applicants must then resubmit corrected applications with fees by the application deadline or it will be rejected.**

Please use these instructions when completing the following items on the application:

1. **PERSONAL INFORMATION:** Please print legibly or type your full name; no nicknames. Do not abbreviate street or city names; please include your postal code. Print your e-mail address (required). Should your name or address change after submitting the application, please contact the IBCE® Processing Department at **processing@ibce.org**.
2. **EXAMINATION FEES:** Enclose with your application examination fee \$935 USD payable to IBCE® in U.S. guaranteed funds. Your account must be paid in full before your application will be processed. The IBCE® cannot accept credit cards, personal checks or business checks, or interbank wire transfers.

**REFUND POLICY:** Written requests to withdraw from the examination will be accepted and a partial refund will be issued if your request is postmarked by the date below. There are no exceptions to this deadline.

- Withdrawal deadline: 10 August, 2012
- Withdrawal refund: \$580 USD

The IBCE® will not issue refunds to applicants who fail to take an examination, applicants who apply but take only a portion of their examination, applicants who withdraw from the examination or become ineligible to take the examination after the cancellation deadline, or applicants who arrive late for the examination.

3. **EXAMINATION DATE AND LOCATION OF PORTUGUESE SPEC TEST ADMINISTRATION:** Portuguese SPEC tests are given in March and September of each year. Portuguese SPEC tests are available in Europe and other global locations. Please consult the IBCE® website [www.ibce.org](http://www.ibce.org) to view a listing of future dates and select an examination location.
4. **Postmark Deadline:** 10 July, 2012
5. **APPLICANT'S SIGNATURE:** Application must be signed by the person making application for the Portuguese SPEC.
6. **APQ VERIFICATION:** Section 6 must be signed by an authorized representative of the Associação Portuguesa dos Quiropráticos (APQ).

### **MAIL COMPLETED APPLICATION AND FEE TO:**

**IBCE – Applications**  
901 54th Ave  
Greeley, CO 80634

USA

**You must present two forms of identification upon arrival at the test site, including one government-issued identification card with your photograph.**

**INTERNATIONAL BOARD OF CHIROPRACTIC EXAMINERS®**  
**Portuguese Special Purposes Examination for Chiropractic (SPEC) 2012**  
**APPLICATION**

Please refer to Instructions. Improperly completed applications will be returned.

**1. Personal Information:**

**Name:** \_\_\_\_\_  
Last Name First Name (no nicknames) Middle Name

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

**E-mail address:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_ **Telephone:** \_\_\_\_\_  
(Required) (dd/mm/yyyy) (include country code)

**Chiropractic College attended:** \_\_\_\_\_ **Graduation date:** \_\_\_\_\_  
(mm/yyyy)

**2. Examination Fee:** Portuguese SPEC: **\$935 USD**

**3. Date of Exam:** 15 September, 2012 **Test Site Requested:** \_\_\_\_\_

**4. Postmark Deadline for September 2012 exam:** 10 July, 2012

"I understand that I can be disqualified or permanently prohibited from taking or continuing to take an examination, and my scores on an examination or all examinations taken may be withheld, revoked, or invalidated, if the International Board of Chiropractic Examiners (IBCE®) test administrator or other IBCE® representatives conclude: 1) I have provided any false or misleading information, committed forgery, or failed to reveal material information in any communication directed to the IBCE®, or on any forms, test accommodation requests, or applications submitted to the IBCE®. 2) I take an examination for another person or another person takes an examination in my place. 3) I have given or received aid in the examination as evidenced by observation or statistical analyses of answer sheets. 4) I engage in any act or conduct that jeopardizes or could jeopardize the security or integrity of IBCE® examinations; such action or conduct may include, but is not limited to, copying or reproducing any portion of the examination, or memorizing questions and answers and furnishing those memorized questions and/or answers to any other person at any time. 5) I have engaged in any other conduct that may invalidate the examination results, including, but not limited to, removing items from the testing room. 6) I engage in any behavior that is deemed to be disruptive, offensive, or inappropriate in any way to the testing environment. Further, I understand that in the event I direct any inappropriate behavior to any representative of the IBCE®, my actions may be reported to the appropriate regulatory officials.

For security reasons, I understand that I may NOT bring any materials to the testing room. Such materials include, but are not limited to, notes, reference materials of any kind, writing instruments, purses, backpacks, bookbags of any kind, cameras, mobile phones, electronic devices (including remote keyless entry devices for vehicles), weapons, watches, coats, hooded sweatshirts with pockets, hats, food, drinks, or any other items that may be questioned by test site or security personnel. I understand that I may have a sweater or a sweatshirt without pockets available in case the temperature is below my comfort level. **I understand that examinees may be subject to individual security screening procedures, including the use of metal detection devices. I understand that examinees who refuse to submit to individual security screenings may be denied entrance to or be expelled from the testing area.**

I acknowledge that any failure to adhere to instructions given at the examination site, or any conduct or communication during an examination by which I obtain information from another examinee or give information to another examinee, or bring notes into the testing room, thereby placing myself or any other examinee at an advantage he or she otherwise would not have had, shall constitute cheating. **Additionally, the IBCE® reserves the right to withhold, cancel, or revoke an examinee's results and require an examinee to retake any examination(s) if there is sufficient evidence that the security of the examination or the validity of the examinee's results has been compromised, notwithstanding the absence of an examinee's involvement in any violation of the rules, as previously set forth."**

This application and the examination shall be deemed to have been made and accepted in Colorado, USA, where the International Board of Chiropractic Examiners' principal place of business is located. The application and examination shall be interpreted, and all transactions hereunder and all rights and liabilities of the parties thereto, shall be determined and governed as to validity, interpretation, enforcement and effect by the laws of the State of Colorado. The United States District Court and the District Courts for the State of Colorado shall have exclusive jurisdiction over all actions and proceedings arising directly or indirectly from this application and examination and applicant hereby consents to the jurisdiction of these courts.

**5. Applicant's signature:** X \_\_\_\_\_ **Date:** \_\_\_\_\_

By my signature hereon, I grant permission to the IBCE® to send my test score to the APQ.

**6. APQ verification:** X \_\_\_\_\_ **Date:** \_\_\_\_\_

I certify that this applicant has met the standards and requirements of the APQ, and is eligible for the Portuguese SPEC.