



### CHANGE OF SITE/CANCELLATION FORM

Last Name

First Name

MI

Date of Birth mm/dd/yy

Membership/Account#

Please choose **ONLY ONE** (1) of the following options:

I would like to CANCEL my current seminar/exam or exam only registration

I would like to RESCHEDULE for a later date:

Site Code \_\_\_\_\_ Exam Date \_\_\_\_\_ City/State \_\_\_\_\_ Submission Deadline \_\_\_\_\_

AWS Seminar/Exam Schedule can be viewed on our website <http://www.aws.org/certification/seminarexam/>

**By signing below, I understand and agree to the following:**

- I am submitting a written request to reschedule or cancel my current registration for seminar and/or exam
- This form **DOES NOT** guarantee acceptance for the new requested seminar and/or exam date(s)
- I have read and will comply to the *AWS Policies and Fees* (<http://www.aws.org/certification/policiesfees/>)
- I understand that I forfeit all fees if this form has not been received in accordance with the *AWS Policies and Fees*  
**NO EXCEPTIONS**
- I have provided my payment information below for any applicable fees in order to fulfill my request

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

This form can be faxed to (305) 443-6445, emailed to [certification@aws.org](mailto:certification@aws.org) or mailed to AWS Certification Department 550 NW LeJeune Rd Miami, FL 33126  
PLEASE CALL TO VERIFY RECEIPT

\* To reschedule or cancel **SEMINAR ONLY**, you must contact the Education Department at extension 223 in accordance with the [AWS Policies and Fees](#)

Method of Payment

Check of Money Order # \_\_\_\_\_

Visa    MC    AMEX    Discover

CC# \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Exp. \_\_\_\_\_ / \_\_\_\_\_

AWS USE ONLY	
Acct#	
Date	
Amt\$	

Signature \_\_\_\_\_