



**National Performance Specialists
Certification Governing Committee (NPS-CGC)**

Certification by Equivalency Addendum

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1. General Information

Purpose of this Addendum

The Certification by Equivalency pathway allows holders of accepted professional certifications to obtain the corresponding NPS certification without taking an additional NPS certification examination. Applicants must meet the eligibility, verification, and current competence requirements in this addendum. After NPS certification is issued, the certificant follows NPS renewal requirements.

Before You Apply

1. Find your NPS program in Appendix A and check the exact credential and any additional conditions.
2. Choose one current competence option in Section 4 and gather the supporting records.
3. Complete identity verification, then submit the candidate application and documentation described in Section 5.

If you hold or previously held the same NPS certification, use the NPS renewal or reinstatement process described in the Candidate Handbook.

Scope and Authority

This addendum applies to the NPS certification programs listed in Appendix A. Each program has its own accepted credentials and conditions. Acceptance for one program does not establish eligibility for another.

The NPS-CGC establishes and approves the equivalency criteria, accepted credential schedule, and conditions of recognition. Certification staff apply these requirements and verify individual applications. Staff may not add an issuer, credential, earning route, or exception to the schedule without an authorized NPS-CGC determination.

Relationship to the Candidate Handbook

This addendum supplements the [NPS-CGC Certification Programs Candidate Handbook](#) and establishes the Certification by Equivalency pathway. Section 2 establishes the limited exception to the ordinary initial qualification and additional NPS examination requirements in Sections 2 and 11 of the Handbook for applications under this pathway. All other applicable Handbook requirements and terms remain controlling, including identity, age and education requirements, ethics, confidentiality, fees, payments, refunds, appeals, certification status, and subsequent renewal or reinstatement. Read this addendum together with the Handbook and the [NPS Terms & Conditions](#) referenced by the Handbook.

Certification through equivalency results in a separate NPS credential. It does not renew, amend, or extend the certification issued by another organization.

Definitions

- Accepted credential: the exact professional certification and earning route listed in Appendix A, subject to its conditions.

- **Equivalency:** an NPS-CGC determination that a credential provides an acceptable basis for recognizing assessed competence for the corresponding NPS program. It does not mean that all examination items, scores, or training requirements are identical.
- **Full certification:** an earned professional credential for which the issuing organization has completed all award requirements. A provisional award, examination pass with outstanding requirements, course completion certificate, or membership is not full certification.
- **Eligible credential status:** a full credential that is current or expired no more than 365 calendar days under Section 2. It must not be suspended, revoked, or subject to a disqualifying restriction; expiration alone is permitted.

Recognition and Professional Requirements

Acceptance under this addendum is an NPS certification decision. Listing a credential does not establish a reciprocal agreement or endorsement by its issuer. NPS certification does not replace a license or satisfy a state or employer requirement that expressly requires a different credential. Applicants are responsible for confirming the requirements applicable to their intended employment.

2. Eligibility Requirements

General Requirements

Applicants must hold a full credential listed for the requested NPS program in Appendix A with eligible status under this section; meet all listed credential conditions; complete NPS identity and application verification; satisfy one Section 4 current competence option; and meet the applicable Candidate Handbook requirements, attestations, and payment terms.

Current and Recently Expired Credentials

A current credential or one expired solely for nonrenewal may qualify. NPS must receive the complete application and all required applicant evidence no later than 365 calendar days after expiration; payment or an incomplete submission does not preserve eligibility. NPS processing time alone does not invalidate a timely complete application.

Credential Status and Verification

The credential must have been full and unrestricted before expiration and remain free of disqualifying restrictions through issuance. Suspended, revoked, provisional, or otherwise restricted awards are ineligible. NPS verifies the award, approved earning route, expiration date, and disciplinary status. Renewal with the original issuer is not required. Credentials expired more than 365 days are ineligible under this pathway.

How the External Credential Was Earned

Unless Appendix A expressly provides otherwise, acceptance is limited to full certification earned by passing the issuer's applicable certification examination and completing its award requirements. Reciprocity, reclamation, honorary or documentary awards, and grandfathered entry without the required assessment are not accepted merely because the credential title matches; a nonexamination earning route must be expressly listed in Appendix A. NPS verifies the route through issuer records or other

reliable evidence and asks the applicant for help only when needed to verify a requirement or resolve a discrepancy.

Once NPS verifies the approved earning route, the accepted credential and any evidence required by Appendix A provide alternative evidence of the corresponding NPS program's training or work experience and assessment requirements, including the clinical prerequisites covered by the approved credential comparison. Applicants do not need to repeat initial training or work experience requirements or take an additional NPS certification examination.

Remaining Handbook Requirements

Handbook diploma or equivalent, age-waiver, identity, ethics, and disclosure requirements remain applicable. Applicants attest to these requirements and provide existing supporting records when needed for verification.

Existing Clinical Records

Applicants do not need to recreate old clinical logs to duplicate the issuer's certification process. They must still meet all published conditions for their credential.

Previous NPS Certification

An applicant who holds or previously held the same requested NPS certification must use the applicable renewal, reinstatement, or examination process in the Candidate Handbook. This addendum does not reset a lapsed NPS credential or replace the Handbook's requirements for that status.

3. How Credentials Are Accepted

Required Program Review

The NPS-CGC reviews each credential and how it is earned before recognizing it for an NPS program. Recognition considers the following:

- **Occupational scope and level:** the credential addresses the same target role, practitioner level, substantial core competencies, and safety-critical responsibilities as the NPS program.
- **Earned qualification:** published eligibility and award requirements establish a full professional certification and identify the routes through which it may be obtained.
- **Assessment:** evidence supports the purpose, content coverage, passing standard, administration, and results of the external assessment and an appropriate comparison with the corresponding NPS assessment.
- **Certification maintenance:** the review compares renewal purpose, activities, time limits, verification, and restrictions, and explains the treatment of material differences.
- **Individual verification:** NPS can reliably verify the applicant, exact credential, status, and required earning-route conditions.
- **Decision and monitoring:** the determination identifies the evidence reviewed, reviewers, approval authority, conditions, effective version, and circumstances requiring reassessment.

Assessment Evidence

NPS-CGC reviews published job analyses, examination content outlines, passing standards, administration policies, technical reports, and examination results. Its documented comparison addresses both content and assessment. Similar pass rates, identical score labels, or accreditation alone do not establish comparable examination results.

The review addresses the exact credential and earning route. Organizational membership, education approval, and employer acceptance alone do not establish equivalency. NPS-CGC retains the evidence supporting each determination.

Material Differences and Unresolved Evidence

Differences in terminology, initial training hours, clinical procedure counts, renewal cycles, or continuing education units do not automatically make a credential ineligible. The NPS-CGC must consider whether the difference affects the intended qualification or current competence and record its rationale. An issuer's reputation cannot resolve missing safety-critical content, an unassessed earning route, or an unverifiable credential.

NPS-CGC may limit an accepted credential to a specified examination route, require stated evidence, or defer recognition when evidence is insufficient. All conditions affecting applicants must appear in this addendum, or Appendix A. Acceptance is an NPS-CGC decision for the specific NPS program and earning route listed.

4. Current Competence Requirements

Applicable Evidence Period

Applicants who have not previously held the corresponding NPS certification must satisfy one (1) of the following three options during the twenty-four (24) months immediately before NPS receives the complete equivalency application. Subsequent NPS renewals follow the Candidate Handbook.

Option 1: Recent Certification Examination

The applicant may provide verifiable evidence of successfully passing the certification examination for the accepted credential during the applicable twenty-four (24)-month period and receiving the full credential. The examination must be part of the approved earning route. The date of payment, card replacement, administrative renewal, or documentary award is not an examination date. A recent approved recertification examination may be used when its scope and resulting credential meet the same approved equivalency requirements.

Option 2: Continuing Education

The applicant may document at least twenty (20) contact hours of qualifying continuing education related to the requested NPS program, completed during the applicable evidence period, including after external credential expiration when submitted within the Section 2 deadline. Relevance and documentation are evaluated under the Candidate

Handbook. Education already completed for another organization may be used when it independently meets these requirements; repeating the same education is not required.

Credits, points, and CEUs must be evaluated using the issuing organization's documented unit definitions and the activity record. NPS will not assume that ten (10) credits always equal twenty (20) contact hours or that a five-year activity total occurred within the applicable two-year period. Education exceeding the requirement does not carry forward to a later NPS renewal period.

Option 3: Professional Practice

The applicant may document at least twelve (12) total months of directly relevant employment averaging at least thirty (30) hours per week during the applicable evidence period. Employment may be combined across employers when adequately documented. Employer verification must identify relevant duties, dates, and average hours.

Practice Before Expiration

For an expired credential, qualifying employment must fall within the evidence period and on or before expiration; employment after expiration does not qualify. A job title or credential alone does not establish this requirement.

Using External Renewal Records

An external organization's maintenance record may support the selected Section 4 option. A legacy maintenance exemption does not, by itself, disqualify a verified examination-earned credential with eligible status under Section 2. It also does not waive current competence: longer renewal cycles, activity totals outside the evidence period, and payment-only renewals do not independently satisfy this section.

5. Application Process

Identity Verification and Application

Complete NPS-designated identity verification before submitting the candidate application for decision. The application must identify the requested NPS program, issuing organization, exact credential, credential number or official verification reference, status, expiration date if issued, and selected Section 4 option. NPS verifies the earning route through issuer records or other reliable evidence.

Examination Dates and Disclosures

Original examination and award dates are requested only when needed for the selected competence option, a listed credential condition, or an unresolved verification question. Disclose any restriction, suspension, revocation, or other matter required by the Candidate Handbook.

Use the program-specific two-page Application for Certification by Equivalency in Appendix B. Submit both pages, the credential record or official verification reference, any applicable evidence required by Appendix A, records for one Section 4 option, and the signed attestation. Applicants may use existing issuer records, CE transcripts,

completion records, and employer letters when they contain the required information; applicants do not need to retype information already provided. Each NPS program requires a separate application, decision, and payment.

Verification and Additional Information

NPS will verify the credential through the issuing organization's official registry, direct confirmation, or another reliable issuer-authorized record. A certificate image alone may be insufficient. The applicant must provide any verification identifier or authorization needed for the review. NPS may contact an issuer, education provider, or employer as permitted by the applicant's authorization and applicable confidentiality requirements.

If an applicant cannot locate a credential number or historical record, NPS may assist with issuer verification. Not remembering a credential number or date does not make an applicant ineligible. NPS must still verify all required facts before approval. NPS may request additional information to resolve a material discrepancy or listed condition.

Incomplete Applications

An incomplete application remains pending until NPS receives the required information. Submission, payment, or a pending application does not grant active NPS certification or authorize use of an NPS designation.

6. Decisions and Fees

Review and Notification

NPS reviews applications against this addendum and the accepted credential tables. Staff verify routine applications; uncertain or disputed equivalency questions are referred to NPS-CGC or its authorized certification decision-maker. A person with a conflict of interest must not decide the affected application.

NPS will notify the applicant of approval, a request for additional information, or denial in writing. Complete applications generally will be reviewed within ten (10) business days. A denial notice will state the reason and applicable appeal procedure. NPS will notify applicants if additional verification delays the review. The review estimate does not guarantee approval.

Fees and Applicable Terms

The applicable certification fee in Section 3 of the [Candidate Handbook](#) applies to each requested NPS credential. Payment, refund, and related purchase terms remain governed by the Handbook. This addendum establishes no separate fee schedule or refund exception.

Each requested certification requires a separate application, decision, and payment under the Handbook. Credential-specific verification conditions in Appendix A do not establish an additional application fee.

7. NPS Certification and Renewal

Obtaining the NPS Credential

NPS issues the certification after all requirements are met and it records the decision. The certification period specified in the Candidate Handbook begins on the date NPS issues the credential. NPS provides the applicable credential identifier and verification record. An external examination score is not reported as an NPS examination result.

The NPS certification record does not extend the external certification or retroactively establish NPS status before issuance. The applicant may use the NPS designation as current only after issuance and while the NPS credential remains active and in good standing.

Renewing the NPS Credential

After issuance, NPS certification maintenance, renewal, late renewal, and reinstatement are governed by Section 11 of the Candidate Handbook. Maintaining or renewing the external credential does not automatically renew the NPS credential.

This addendum does not change the Handbook's certification-status rules or restore a prior lapse in NPS certification.

8. Appeals, Ethics, and Records

Appeals

Appeals of equivalency application decisions follow the application appeal procedures, deadlines, and submission requirements in Section 12 and the applicable appeal form in the [Candidate Handbook](#).

An appeal may address an error in applying published criteria or consideration of additional relevant evidence. An appeal does not itself add an unlisted credential, authorize use of the NPS designation, or require NPS to accept an unsupported equivalency.

Ethics, Confidentiality, and Corrections

The Candidate Handbook's Professional Code of Ethics, disciplinary procedures, confidentiality requirements, and correction and appeal procedures apply to applications and credentials under this addendum.

NPS maintains the supporting equivalency analysis and verification records internally. Public credential verification does not require disclosure of personal application records or supporting evidence.

Records Retention

NPS will retain the application, verification findings, evidence relied upon, decision, conditions, and any appeal record for at least six (6) years after the last certification decision under this pathway, or longer when required by applicable law or the NPS records retention policy. Approved equivalency determinations and supporting technical records must be retained for at least six (6) years after the last decision that relied on

that version. Access is limited to authorized persons. Longer retention requirements for certification status or examination records continue to apply.

9. Review and Changes

Periodic Review

The NPS-CGC will review each accepted credential at least annually and when a material change is identified. The review must consider changes in the external examination, eligibility routes, accreditation scope, maintenance requirements, verification process, and the corresponding NPS program. The NPS-CGC may continue, condition, suspend, or remove a credential from the accepted list based on the documented review. Material applicant requirements must be published in an approved revision. When requirements change, the revised schedule must state when the change applies and how complete applications already submitted will be treated. Approval of additional credentials does not require revision of unrelated Handbook provisions when the incorporated addendum remains the authorized source for this pathway.

Effect on Existing Certificants

Removal of a credential from the accepted list ordinarily affects future applications and does not automatically invalidate an NPS credential properly issued under the policy then in effect. Existing certificants remain subject to NPS renewal and ethics requirements. The applicable certification and disciplinary procedures must address evidence of fraud, a material issuance error, or an immediate safety concern.

10. Addendum Administration

The NPS-CGC is responsible for this addendum, the accepted credential schedule, and material revisions. NPS maintains the approval and revision records internally. Administrative corrections may not change eligibility, credential conditions, or decision standards.

Appendix A lists accepted credentials and their conditions. Appendix B contains the application forms. For assistance, contact support@npscerts.com or call (866) 319-7052.

Appendix A Accepted Credential Schedule

Only the exact credentials and earning routes in these tables are eligible. Every applicant must meet Section 2, satisfy one Section 4 current competence option, complete verification, and pay the applicable fee. “General requirements apply” means no additional credential-specific condition is listed; it does not waive the shared requirements. A full credential must meet the current or recently expired status requirements and deadline in Section 2. A broader medical assistant credential does not automatically qualify its holder for CPT, CET, CPCT, or CMAA.

Program directory: CCMA | CPT | CET | CPCT | CMAA | CBHS

Certified Clinical Medical Assistant (CCMA)

Certifying organization	Accepted credential	Additional conditions
American Association of Medical Assistants (AAMA)	Certified Medical Assistant: CMA (AAMA)	General requirements apply.
American Medical Certification Association (AMCA)	Clinical Medical Assistant Certification (CMAC)	General requirements apply.
American Medical Technologists (AMT)	Registered Medical Assistant (RMA)	General requirements apply.
California Certifying Board for Medical Assistants (CCBMA)	California Certified Medical Assistant (CACMA)	Current comprehensive CACMA only. Legacy clinical-only, administrative-only, and superseded variants are not included.
National Center for Competency Testing (NCCT)	National Certified Medical Assistant (NCMA)	General requirements apply.
National Healthcareer Association (NHA)	Certified Clinical Medical Assistant (CCMA)	General requirements apply.

Certified Phlebotomy Technician (CPT)

Certifying organization	Accepted credential	Additional conditions
American Medical Certification Association (AMCA)	Phlebotomy Technician Certification (PTC)	General requirements apply.
American Medical Technologists (AMT)	Registered Phlebotomy Technician (RPT)	General requirements apply.
American Society for Clinical Pathology Board of Certification (ASCP BOC)	Phlebotomy Technician: PBT (ASCP)	General requirements apply.
American Society for Clinical Pathology Board of Certification (ASCP BOC)	International Phlebotomy Technician: PBT (ASCPi)	Verify the international award, approved examination route, eligible status under Section 2, and clinical qualification.
National Center for Competency Testing (NCCT)	National Certified Phlebotomy Technician (NCPT)	General requirements apply.
National Healthcareer Association (NHA)	Certified Phlebotomy Technician (CPT)	General requirements apply.
National Phlebotomy Association (NPA)	Certified Phlebotomist Technologist	National written and practical examination route only. Verify actual patient collection training or practice using existing training or employer records. Only the national written and practical examination award is eligible; reclamation awards are excluded.

Certified EKG Technician (CET)

Certifying organization	Accepted credential	Additional conditions
American Medical Certification Association (AMCA)	EKG Technician Certification (ETC)	General requirements apply.
Cardiovascular Credentialing International (CCI)	Certified Cardiographic Technician (CCT)	General requirements apply.
National Center for Competency Testing (NCCT)	National Certified ECG Technician (NCET)	General requirements apply.
National Healthcareer Association (NHA)	Certified EKG Technician (CET)	General requirements apply.

Certified Patient Care Technician (CPCT)

Certifying organization	Accepted credential	Additional conditions
American Medical Technologists (AMT)	Patient Care Technician (PCT)	General requirements apply.
National Center for Competency Testing (NCCT)	National Certified Patient Care Technician (NCPCT)	General requirements apply.
National Healthcareer Association (NHA)	Certified Patient Care Technician/Assistant (CPCT/A)	General requirements apply.

Certified Medical Administrative Assistant (CMAA)

Certifying organization	Accepted credential	Additional conditions
American Medical Certification Association (AMCA)	Medical Administrative Assistant Certification (MAAC)	General requirements apply.
American Medical Technologists (AMT)	Certified Medical Administrative Specialist (CMAS)	General requirements apply.
National Center for Competency Testing (NCCT)	National Certified Medical Office Assistant (NCMOA)	General requirements apply.
National Healthcareer Association (NHA)	Certified Medical Administrative Assistant (CMAA)	General requirements apply.
National Association for Health Professionals (NAHP)	Nationally Registered Certified Administrative Health Assistant (NRCAHA)	Verify examination at an NAHP-approved proctored site or through NAHP staff-proctored remote delivery. Physician-office identity attestation alone is not accepted.

Certified Behavioral Health Specialist (CBHS)

Certifying organization	Accepted credential	Additional conditions
No external credential currently listed	No initial CBHS equivalency pathway is listed.	Applicants must use the applicable NPS certification pathway in the Candidate Handbook.

An unlisted organization, credential, or earning route is not eligible. School or program approval, membership, and course completion alone are not accepted personal certifications.

Appendix B Applications for Certification by Equivalency

Use the application for the NPS certification you have selected to renew. Submit both pages and evidence for one current competence option. The Candidate Handbook governs applicable fees and payment terms.

Application Forms

[CCMA: Certified Clinical Medical Assistant \(Form EQ-CCMA\)](#)

[CPT: Certified Phlebotomy Technician \(Form EQ-CPT\)](#)

[CET: Certified EKG Technician \(Form EQ-CET\)](#)

[CPCT: Certified Patient Care Technician \(Form EQ-CPCT\)](#)

[CMAA: Certified Medical Administrative Assistant \(Form EQ-CMAA\)](#)

Before You Apply

Check the exact credential and conditions in Appendix A and choose one current competence option in Section 4. If eligibility, records, or payment instructions are unclear, contact support@npsecerts.com before paying. An inquiry does not establish eligibility or approval.

Complete NPS identity verification through <https://npsecerts.com/my-account/> before submitting the application. Do not email identity-document copies with this form.

Use Existing Records

Submit issuer records or an official verification reference, and existing examination results, CE transcripts, completion records, or employer letters for your selected option. Do not retype information already shown in attached records. NPS verifies the credential, earning route, and supporting evidence and may request only the additional information needed to resolve a requirement or discrepancy.

Complete Applicable Fields

Do not use “N/A” for required evidence. Leave fields marked as conditional and unselected competence-option fields blank. If no expiration date is issued, select that statement and provide issuer verification of current status. If you cannot locate the credential number, provide an official verification reference or contact NPS for assistance; the award must still be verifiable.

No original examination or award date is routinely required. A verified examination date is required when using Option 1, and further historical evidence may be required for an Appendix A condition or an unresolved earning route. If names differ, provide existing documentation connecting the names.

If you hold or previously held the same requested NPS credential, use the [Candidate Handbook](#) renewal or reinstatement process.



**NPS Application for Certification by Equivalency
Certified Clinical Medical Assistant (CCMA)**

Form EQ-CCMA • Page 1 of 2 • Submit both pages.

1. Applicant Information

First Name: _____ **Last Name:** _____

Name on Credential (only if different): _____

Phone: _____ **Email:** _____

Address: _____

City: _____ **State:** ____ **ZIP Code:** _____

NPS Account Email (only if different): _____

☐ I completed NPS identity verification before submitting this application.

Account and identity verification: <https://npscerts.com/my-account/>

2. Requested Certification

Requested NPS Certification: Certified Clinical Medical Assistant (CCMA)

Do you hold or have you previously held this exact NPS credential?

☐ No ☐ Yes: use the Handbook renewal or reinstatement process.

3. External Credential

Issuing Organization: _____

Exact Credential/Designation: _____

Credential Number or Official Verification Reference: _____

Expiration Date, if issued: _____ ☐ **No expiration date issued**

Attach an existing credential record or provide an official issuer verification reference.

The full credential must meet Section 2: current or expired solely for nonrenewal within 365 days when NPS receives the complete application and required evidence.

Disqualifying restrictions are excluded. NPS can assist with verification; unverifiable awards are ineligible.

Accepted credentials (Appendix A): AAMA CMA (AAMA); AMCA CMAC; AMT RMA; CCBMA comprehensive CACMA; NCCT NCMA; NHA CCMA.

CCBMA: only the current comprehensive CACMA qualifies; legacy clinical-only, administrative-only, and superseded variants are excluded.

Use existing records for any listed condition. Do not recreate clinical logs or repeat initial training solely to duplicate the issuer's process. NPS may request additional evidence when a condition or material discrepancy remains unresolved.

Form EQ-CCMA • Competence, Attestation, and Submission

Page 2 of 2 • Applicant Name: _____

4. Current Competence: Select One (1) Option

Evidence must fall within the 24 months before the complete application. For expired credentials, practice must precede or end on expiration; CE may follow expiration within Section 2's deadline. Attach existing records for one option; no duplicate activity log is required.

☐ Option 1: Recent Certification Examination

Attach issuer-authorized proof of passing an approved examination for the accepted credential within the evidence period and receiving the full credential. A qualifying recertification examination may be used. The actual examination date must be verifiable; payment or administrative renewal dates do not qualify.

Examination/Date (only if not shown in attached record): _____

☐ Option 2: Continuing Education

Attach a transcript or completion records showing at least twenty (20) qualifying contact hours related to this program, with your name, activities, providers, dates, and hours. For credits, points, or CEUs, include the issuer's unit definition and contact-hour conversion. Third-party education may qualify.

☐ Option 3: Professional Practice

Attach employer records or a verification letter showing relevant duties, dates, and average hours: at least twelve (12) total months averaging thirty (30) hours per week within the evidence period. Multiple employers may be combined. Provide a verification contact if absent from the records.

Verifier Name/Title/Phone or Email (only if absent): _____

5. Attestation and Authorization

Any restriction, suspension, revocation, or other matter requiring disclosure under the Handbook? ☐ No ☐ Yes: attach an explanation and records.

I certify that my application and supporting records are true and accurate, that I meet applicable NPS eligibility requirements, and that I have disclosed required matters. I authorize NPS to verify the submitted records with their issuers and record holders, subject to applicable confidentiality requirements.

I agree to the NPS-CGC Code of Ethics, the [Candidate Handbook](#), this addendum, and the [NPS Terms & Conditions](#). Submission or payment does not grant certification. If approved, my NPS certification period begins on issuance; its duration and subsequent renewals follow the [Candidate Handbook](#).

Signature: _____ **Date:** _____

6. Submission and Handbook Terms

☐ Both pages ☐ Credential/condition evidence ☐ Selected option evidence
☐ Disclosure records (if applicable)

Payment Reference (if not linked to your NPS account): _____

Email both pages and records to support@npsecerts.com; include payment confirmation unless linked to your NPS account. The Candidate Handbook governs fees, payment instructions, refunds, and purchase terms. Complete applications are generally reviewed within ten (10) business days.



**NPS Application for Certification by Equivalency
Certified Phlebotomy Technician (CPT)**

Form EQ-CPT • Page 1 of 2 • Submit both pages.

1. Applicant Information

First Name: _____ **Last Name:** _____

Name on Credential (only if different): _____

Phone: _____ **Email:** _____

Address: _____

City: _____ **State:** ____ **ZIP Code:** _____

NPS Account Email (only if different): _____

☐ I completed NPS identity verification before submitting this application.

Account and identity verification: <https://npscerts.com/my-account/>

2. Requested Certification

Requested NPS Certification: Certified Phlebotomy Technician (CPT)

Do you hold or have you previously held this exact NPS credential?

☐ No ☐ Yes: use the Handbook renewal or reinstatement process.

3. External Credential

Issuing Organization: _____

Exact Credential/Designation: _____

Credential Number or Official Verification Reference: _____

Expiration Date, if issued: _____ ☐ **No expiration date issued**

Attach an existing credential record or provide an official issuer verification reference.

The full credential must meet Section 2: current or expired solely for nonrenewal within 365 days when NPS receives the complete application and required evidence.

Disqualifying restrictions are excluded. NPS can assist with verification; unverifiable awards are ineligible.

Accepted credentials (Appendix A): AMCA PTC; AMT RPT; ASCP PBT (ASCP) or PBT (ASCPi); NCCT NCPT; NHA CPT; NPA Certified Phlebotomist Technologist.

ASCPi: verify the international award, approved examination route, eligible status under Section 2, and clinical qualification. NPA: national written and practical examination route only; provide existing training or employer records verifying actual patient collection training or practice. Reclamation awards are excluded.

Use existing records for any listed condition. Do not recreate clinical logs or repeat initial training solely to duplicate the issuer's process. NPS may request additional evidence when a condition or material discrepancy remains unresolved.

Form EQ-CPT • Competence, Attestation, and Submission

Page 2 of 2 • Applicant Name: _____

4. Current Competence: Select One (1) Option

Evidence must fall within the 24 months before the complete application. For expired credentials, practice must precede or end on expiration; CE may follow expiration within Section 2's deadline. Attach existing records for one option; no duplicate activity log is required.

☐ Option 1: Recent Certification Examination

Attach issuer-authorized proof of passing an approved examination for the accepted credential within the evidence period and receiving the full credential. A qualifying recertification examination may be used. The actual examination date must be verifiable; payment or administrative renewal dates do not qualify.

Examination/Date (only if not shown in attached record): _____

☐ Option 2: Continuing Education

Attach a transcript or completion records showing at least twenty (20) qualifying contact hours related to this program, with your name, activities, providers, dates, and hours. For credits, points, or CEUs, include the issuer's unit definition and contact-hour conversion. Third-party education may qualify.

☐ Option 3: Professional Practice

Attach employer records or a verification letter showing relevant duties, dates, and average hours: at least twelve (12) total months averaging thirty (30) hours per week within the evidence period. Multiple employers may be combined. Provide a verification contact if absent from the records.

Verifier Name/Title/Phone or Email (only if absent): _____

5. Attestation and Authorization

Any restriction, suspension, revocation, or other matter requiring disclosure under the Handbook? ☐ No ☐ Yes: attach an explanation and records.

I certify that my application and supporting records are true and accurate, that I meet applicable NPS eligibility requirements, and that I have disclosed required matters. I authorize NPS to verify the submitted records with their issuers and record holders, subject to applicable confidentiality requirements.

I agree to the NPS-CGC Code of Ethics, the [Candidate Handbook](#), this addendum, and the [NPS Terms & Conditions](#). Submission or payment does not grant certification. If approved, my NPS certification period begins on issuance; its duration and subsequent renewals follow the [Candidate Handbook](#).

Signature: _____ **Date:** _____

6. Submission and Handbook Terms

☐ Both pages ☐ Credential/condition evidence ☐ Selected option evidence
☐ Disclosure records (if applicable)

Payment Reference (if not linked to your NPS account): _____

Email both pages and records to support@npsecerts.com; include payment confirmation unless linked to your NPS account. The Candidate Handbook governs fees, payment instructions, refunds, and purchase terms. Complete applications are generally reviewed within ten (10) business days.



**NPS Application for Certification by Equivalency
Certified EKG Technician (CET)**

Form EQ-CET • Page 1 of 2 • Submit both pages.

1. Applicant Information

First Name: _____ **Last Name:** _____

Name on Credential (only if different): _____

Phone: _____ **Email:** _____

Address: _____

City: _____ **State:** ____ **ZIP Code:** _____

NPS Account Email (only if different): _____

☐ I completed NPS identity verification before submitting this application.

Account and identity verification: <https://npscerts.com/my-account/>

2. Requested Certification

Requested NPS Certification: Certified EKG Technician (CET)

Do you hold or have you previously held this exact NPS credential?

☐ No ☐ Yes: use the Handbook renewal or reinstatement process.

3. External Credential

Issuing Organization: _____

Exact Credential/Designation: _____

Credential Number or Official Verification Reference: _____

Expiration Date, if issued: _____ ☐ **No expiration date issued**

Attach an existing credential record or provide an official issuer verification reference.

The full credential must meet Section 2: current or expired solely for nonrenewal within 365 days when NPS receives the complete application and required evidence.

Disqualifying restrictions are excluded. NPS can assist with verification; unverifiable awards are ineligible.

Accepted credentials (Appendix A): AMCA ETC; CCI CCT; NCCT NCET; NHA CET.

Use existing records for any listed condition. Do not recreate clinical logs or repeat initial training solely to duplicate the issuer's process. NPS may request additional evidence when a condition or material discrepancy remains unresolved.

Form EQ-CET • Competence, Attestation, and Submission

Page 2 of 2 • Applicant Name: _____

4. Current Competence: Select One (1) Option

Evidence must fall within the 24 months before the complete application. For expired credentials, practice must precede or end on expiration; CE may follow expiration within Section 2's deadline. Attach existing records for one option; no duplicate activity log is required.

☐ Option 1: Recent Certification Examination

Attach issuer-authorized proof of passing an approved examination for the accepted credential within the evidence period and receiving the full credential. A qualifying recertification examination may be used. The actual examination date must be verifiable; payment or administrative renewal dates do not qualify.

Examination/Date (only if not shown in attached record): _____

☐ Option 2: Continuing Education

Attach a transcript or completion records showing at least twenty (20) qualifying contact hours related to this program, with your name, activities, providers, dates, and hours. For credits, points, or CEUs, include the issuer's unit definition and contact-hour conversion. Third-party education may qualify.

☐ Option 3: Professional Practice

Attach employer records or a verification letter showing relevant duties, dates, and average hours: at least twelve (12) total months averaging thirty (30) hours per week within the evidence period. Multiple employers may be combined. Provide a verification contact if absent from the records.

Verifier Name/Title/Phone or Email (only if absent): _____

5. Attestation and Authorization

Any restriction, suspension, revocation, or other matter requiring disclosure under the Handbook? ☐ No ☐ Yes: attach an explanation and records.

I certify that my application and supporting records are true and accurate, that I meet applicable NPS eligibility requirements, and that I have disclosed required matters. I authorize NPS to verify the submitted records with their issuers and record holders, subject to applicable confidentiality requirements.

I agree to the NPS-CGC Code of Ethics, the [Candidate Handbook](#), this addendum, and the [NPS Terms & Conditions](#). Submission or payment does not grant certification. If approved, my NPS certification period begins on issuance; its duration and subsequent renewals follow the [Candidate Handbook](#).

Signature: _____ **Date:** _____

6. Submission and Handbook Terms

☐ Both pages ☐ Credential/condition evidence ☐ Selected option evidence
☐ Disclosure records (if applicable)

Payment Reference (if not linked to your NPS account): _____

Email both pages and records to support@npscerts.com; include payment confirmation unless linked to your NPS account. The Candidate Handbook governs fees, payment instructions, refunds, and purchase terms. Complete applications are generally reviewed within ten (10) business days.



**NPS Application for Certification by Equivalency
Certified Patient Care Technician (CPCT)**

Form EQ-CPCT • Page 1 of 2 • Submit both pages.

1. Applicant Information

First Name: _____ **Last Name:** _____

Name on Credential (only if different): _____

Phone: _____ **Email:** _____

Address: _____

City: _____ **State:** ____ **ZIP Code:** _____

NPS Account Email (only if different): _____

☐ I completed NPS identity verification before submitting this application.

Account and identity verification: <https://npscerts.com/my-account/>

2. Requested Certification

Requested NPS Certification: Certified Patient Care Technician (CPCT)

Do you hold or have you previously held this exact NPS credential?

☐ No ☐ Yes: use the Handbook renewal or reinstatement process.

3. External Credential

Issuing Organization: _____

Exact Credential/Designation: _____

Credential Number or Official Verification Reference: _____

Expiration Date, if issued: _____ ☐ **No expiration date issued**

Attach an existing credential record or provide an official issuer verification reference.

The full credential must meet Section 2: current or expired solely for nonrenewal within 365 days when NPS receives the complete application and required evidence.

Disqualifying restrictions are excluded. NPS can assist with verification; unverifiable awards are ineligible.

Accepted credentials (Appendix A): AMT PCT; NCCT NCPCT; NHA CPCT/A.

Use existing records for any listed condition. Do not recreate clinical logs or repeat initial training solely to duplicate the issuer's process. NPS may request additional evidence when a condition or material discrepancy remains unresolved.

Form EQ-CPCT • Competence, Attestation, and Submission

Page 2 of 2 • Applicant Name: _____

4. Current Competence: Select One (1) Option

Evidence must fall within the 24 months before the complete application. For expired credentials, practice must precede or end on expiration; CE may follow expiration within Section 2's deadline. Attach existing records for one option; no duplicate activity log is required.

☐ Option 1: Recent Certification Examination

Attach issuer-authorized proof of passing an approved examination for the accepted credential within the evidence period and receiving the full credential. A qualifying recertification examination may be used. The actual examination date must be verifiable; payment or administrative renewal dates do not qualify.

Examination/Date (only if not shown in attached record): _____

☐ Option 2: Continuing Education

Attach a transcript or completion records showing at least twenty (20) qualifying contact hours related to this program, with your name, activities, providers, dates, and hours. For credits, points, or CEUs, include the issuer's unit definition and contact-hour conversion. Third-party education may qualify.

☐ Option 3: Professional Practice

Attach employer records or a verification letter showing relevant duties, dates, and average hours: at least twelve (12) total months averaging thirty (30) hours per week within the evidence period. Multiple employers may be combined. Provide a verification contact if absent from the records.

Verifier Name/Title/Phone or Email (only if absent): _____

5. Attestation and Authorization

Any restriction, suspension, revocation, or other matter requiring disclosure under the Handbook? ☐ No ☐ Yes: attach an explanation and records.

I certify that my application and supporting records are true and accurate, that I meet applicable NPS eligibility requirements, and that I have disclosed required matters. I authorize NPS to verify the submitted records with their issuers and record holders, subject to applicable confidentiality requirements.

I agree to the NPS-CGC Code of Ethics, the [Candidate Handbook](#), this addendum, and the [NPS Terms & Conditions](#). Submission or payment does not grant certification. If approved, my NPS certification period begins on issuance; its duration and subsequent renewals follow the [Candidate Handbook](#).

Signature: _____ **Date:** _____

6. Submission and Handbook Terms

☐ Both pages ☐ Credential/condition evidence ☐ Selected option evidence
☐ Disclosure records (if applicable)

Payment Reference (if not linked to your NPS account): _____

Email both pages and records to support@npscerts.com; include payment confirmation unless linked to your NPS account. The Candidate Handbook governs fees, payment instructions, refunds, and purchase terms. Complete applications are generally reviewed within ten (10) business days.



**NPS Application for Certification by Equivalency
Certified Medical Administrative Assistant (CMAA)**

Form EQ-CMAA • Page 1 of 2 • Submit both pages.

1. Applicant Information

First Name: _____ **Last Name:** _____

Name on Credential (only if different): _____

Phone: _____ **Email:** _____

Address: _____

City: _____ **State:** ____ **ZIP Code:** _____

NPS Account Email (only if different): _____

☐ I completed NPS identity verification before submitting this application.

Account and identity verification: <https://npscerts.com/my-account/>

2. Requested Certification

Requested NPS Certification: Certified Medical Administrative Assistant (CMAA)

Do you hold or have you previously held this exact NPS credential?

☐ No ☐ Yes: use the Handbook renewal or reinstatement process.

3. External Credential

Issuing Organization: _____

Exact Credential/Designation: _____

Credential Number or Official Verification Reference: _____

Expiration Date, if issued: _____ ☐ **No expiration date issued**

Attach an existing credential record or provide an official issuer verification reference.

The full credential must meet Section 2: current or expired solely for nonrenewal within 365 days when NPS receives the complete application and required evidence.

Disqualifying restrictions are excluded. NPS can assist with verification; unverifiable awards are ineligible.

Accepted credentials (Appendix A): AMCA MAAC; AMT CMAS; NCCT NCMOA; NHA CMAA; NAHP NRCAHA.

NAHP: provide evidence of examination at an NAHP-approved proctored site or through NAHP staff-proctored remote delivery. Physician-office identity attestation alone is not accepted.

Use existing records for any listed condition. Do not recreate clinical logs or repeat initial training solely to duplicate the issuer's process. NPS may request additional evidence when a condition or material discrepancy remains unresolved.

Form EQ-CMAA • Competence, Attestation, and Submission

Page 2 of 2 • Applicant Name: _____

4. Current Competence: Select One (1) Option

Evidence must fall within the 24 months before the complete application. For expired credentials, practice must precede or end on expiration; CE may follow expiration within Section 2's deadline. Attach existing records for one option; no duplicate activity log is required.

☐ Option 1: Recent Certification Examination

Attach issuer-authorized proof of passing an approved examination for the accepted credential within the evidence period and receiving the full credential. A qualifying recertification examination may be used. The actual examination date must be verifiable; payment or administrative renewal dates do not qualify.

Examination/Date (only if not shown in attached record): _____

☐ Option 2: Continuing Education

Attach a transcript or completion records showing at least twenty (20) qualifying contact hours related to this program, with your name, activities, providers, dates, and hours. For credits, points, or CEUs, include the issuer's unit definition and contact-hour conversion. Third-party education may qualify.

☐ Option 3: Professional Practice

Attach employer records or a verification letter showing relevant duties, dates, and average hours: at least twelve (12) total months averaging thirty (30) hours per week within the evidence period. Multiple employers may be combined. Provide a verification contact if absent from the records.

Verifier Name/Title/Phone or Email (only if absent): _____

5. Attestation and Authorization

Any restriction, suspension, revocation, or other matter requiring disclosure under the Handbook? ☐ No ☐ Yes: attach an explanation and records.

I certify that my application and supporting records are true and accurate, that I meet applicable NPS eligibility requirements, and that I have disclosed required matters. I authorize NPS to verify the submitted records with their issuers and record holders, subject to applicable confidentiality requirements.

I agree to the NPS-CGC Code of Ethics, the [Candidate Handbook](#), this addendum, and the [NPS Terms & Conditions](#). Submission or payment does not grant certification. If approved, my NPS certification period begins on issuance; its duration and subsequent renewals follow the [Candidate Handbook](#).

Signature: _____ **Date:** _____

6. Submission and Handbook Terms

☐ Both pages ☐ Credential/condition evidence ☐ Selected option evidence
☐ Disclosure records (if applicable)

Payment Reference (if not linked to your NPS account): _____

Email both pages and records to support@npsecerts.com; include payment confirmation unless linked to your NPS account. The Candidate Handbook governs fees, payment instructions, refunds, and purchase terms. Complete applications are generally reviewed within ten (10) business days.