

AOBNMM CANDIDATE STATEMENT/RELEASE

I hereby make application to the American Osteopathic Board of Neuromusculoskeletal Medicine (the “Board”) for examination leading to certification in Neuromusculoskeletal Medicine and Osteopathic Manipulative Treatment. This action is made in accordance with and subject to the Constitution, By-Laws, Regulations and Requirements of the American Osteopathic Board of Neuromusculoskeletal Medicine and the American Osteopathic Association (“AOA”). I understand that the certifying examination is a proprietary document of the American Osteopathic Board of Neuromusculoskeletal Medicine and the AOA, and that I do not and will not have the right to review the examination or any examination questions at any time prior to or following the administration of the examination.

I agree to disqualification from examination or from issuance of certification or to the surrender of such certification as directed by the Board and/or the AOA in the event that any of the statements made by me in this Application are false or in the event that any of the bylaws, rules, regulations and requirements governing such examinations are violated by me or in the event that I did not comply with any of the provisions of the Constitutions, Bylaws, Regulations and Requirements of the Board and/or the AOA.

I agree that my professional qualifications, including my moral and ethical standing in the osteopathic medical profession and my competence in clinical skills, will be evaluated by the Board and that the Board may make inquiry of the persons named in my application and of other persons, such as authorities of licensing bodies, hospitals, program directors or other institutions as the Board may deem appropriate with respect to such matters; and I agree that the sources and all information furnished to the Board in connection with its inquiry shall be confidential and not subject to disclosure, through legal process or otherwise, to me or to any person acting on my behalf. I agree that the

Board and the American Osteopathic Association shall be the sole judges of my credentials and qualifications for admission to the examination and for certification.

I hereby release, discharge, exonerate and agree to hold harmless the American Osteopathic Association, American Osteopathic Board of Neuromusculoskeletal Medicine, their members, examiners, trustees, officers, representatives and agents and free from any action, suit, obligation, damage, expense, claim, demand or complaint by reason of any action they or any one of them may take in connection with this application, such certifying examinations, the grade or grades given with respect to any certifying examination, and/or the failure of the American Osteopathic Board of Neuromusculoskeletal Medicine to recommend issuance to me of such certification, or the revocation of any certification issued pursuant to this application. It is understood that the decision as to whether my performance on any certification examination qualifies me for certification rests solely and exclusively with the Board and the American Osteopathic Association, and that their decision is final.

In the event that any dispute shall arise concerning the certifying examination's content and/or administration, or any other issue relating to the certification process, I understand that the AOA has an administrative appeal process available and I agree to first pursue all available administrative appeals and internal reviews before pursuing any other forms of relief.

I further agree that Illinois law shall apply to the resolution of any dispute that I may have with the American Osteopathic Board of Neuromusculoskeletal Medicine and the AOA.

I have this day carefully read and agreed to full compliance with the foregoing.

I have hereunto set my hands this _____ day of _____,
2_____

Signature

Name Printed