

## STATEMENT OF UNDERSTANDING FOR ISSUANCE OF CERTIFICATION

The following statement is to be signed by each applicant for the AOBFP Family Medicine and OMT Certification Examination relative to the completion of all requirements for the issuance of certification by the American Osteopathic Association (AOA).

I understand that –

1. I may sit for examination prior to the completion of my training program if my application is approved and I am scheduled by the AOBFP according to the eligibility requirements outlined within this application; and
2. I will receive a pass or fail designation from the AOBFP within eight weeks post-examination; and
3. I will not receive the final score results on the cognitive examination nor be recommended for certification by the AOA until the American College of Osteopathic Family Physicians (ACOFPP) and/or the AOA have determined training 'complete and approved' status; and
4. The successful completion of the examination, the review and approval of the residency paperwork and the awarding of certification **must be accomplished within six years from the date of completion of the training program**; and
5. My exam results will be null and void if all requirements are not satisfactorily fulfilled at the end of the six-year period of eligibility.

\_\_\_\_\_ By checking this box, I agree to the content above.

Name \_\_\_\_\_

Date \_\_\_\_\_

AOA#: \_\_\_\_\_

Applicant must return with all required application materials to:

AOBFP  
330 E. Algonquin Road, Suite #6  
Arlington Heights, IL 60005