



2022 PEDIATRIC ADULT ALLERGY & IMMUNOLOGY CONJOINT EXAMIANTION  
WAIVER ADDENDUM  
DISCLAIMER and AGREEMENT regarding the EXAMINATION RESULTS

I \_\_\_\_\_ (Printed Name) understand, acknowledge, and accept without exception, that the results of the **2022 administration of Pediatric Adult Allergy and Immunology Conjoint Subspecialty Examination** shall be made known to me until such time as I have completed submission of all required documentation (as deemed required by the AOBP and AOA in their sole discretion) and so stated, item by item, in any and all forms of notification, including any letters of deficiency. Furthermore, I acknowledge and agree that it is my responsibility to maintain and give notice to AOBP and AOA of changes in a specific physical mailing address and phone number for delivery of such letters now, and in the future until having completed the application process required for achieving board certification in this specialty. Specifically, in that the usual prerequisite fellowship documentation for examination may have not been fully met, the following covenants and restrictions shall forever apply to the results of any or all examinations administered by the AOBP, including without limitation the **2022** examination administration remotely proctored in the United States.

The American Osteopathic Board of Pediatrics (AOBP) has agreed to let me participate in the **2022 examination administration of the Pediatric Adult Allergy and Immunology Conjoint Subspecialty** with the expressed understanding that the results, regardless of pass or fail, shall NOT be made known, released, or allowed to apply toward the examination fulfillment requirement for certification in subspecialty until such time as all documentation is on file with the AOBP and the American Osteopathic Association (AOA), and verified by both entities according to their usual and customary protocols, regardless of whether that process extends beyond the actual examination dates.

Print Full Name: \_\_\_\_\_

AOD ID: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_