

# 2016 Certified Surgical First Assistant (CSFA) Examination Application



## INSTRUCTIONS:

Please read entire application and complete fully. Allow 4 - 6 weeks for processing. If you have any questions, please contact the NBSTSA Certification Department directly at (800) 707-0057 or email questions to mail@nbstsa.org.

Last Name First (**Legal name**) Middle

Other Names You Have Used (please include copy of legal documentation to change name on file)

Mailing Address (include apartment # if applicable) City State Zip Code

Home Phone Number Work Phone Number Cell Number

Social Security Number Certification Number

Email Secondary Email

Are you a national member of ASA/AST?  No  Yes, member number \_\_\_\_\_

## ELIGIBILITY OPTIONS:

Check the appropriate eligibility level box. Incomplete applications will not be accepted.

\*Proof of graduation must include school name, date of graduation and type of degree received.

**Eligibility Option** (please select one of the following and include all required documents):

Graduate of a CAAHEP accredited surgical first assistant program.

School name: \_\_\_\_\_

✓ Copy of a diploma, transcript or notarized and signed letter from Program Director or registrar stating date of graduation from the surgical first assistant program and the type of degree received.

For additional details about eligibility changes please visit [nbstsa.org](http://nbstsa.org)

Currently certified as a CST through NBSTSA. **This pathway will close after December 1, 2016**

✓ Pre-Authorization form for each sponsoring facility with evidence of malpractice coverage. (MUST be submitted PRIOR to clinical experience and application.)

✓ Case logs demonstrating 200 cases (75 general surgery, 75 one speciality area, 50 any other speciality area).

✓ Experience Verification form. Must be completed by Director of Surgery where cases were earned.

Current CSA (Certified Surgical Assistant) or SA-C (Surgical Assistant - Certified). **This pathway will close after December 1, 2016**

✓ Proof of certification from either NSAA or ABSA.

✓ 50 continuing education credits in first assisting submitted on the CE reporting form.

✓ Case logs demonstrating 200 cases (75 general surgery, 75 one speciality area, 50 any other speciality area).

✓ Experience Verification form. Must be completed by Director of Surgery where cases were earned.

Graduate of a military surgical technology program. **This pathway will close after December 1, 2016**

✓ Copy of a diploma, DD214, or Smart Transcript (Must state the location of the military base where the program completed and the date of completion.)

✓ Case logs demonstrating 200 cases (75 general surgery, 75 one speciality area, 50 any other speciality area).

✓ Experience Verification form. Must be completed by Director of Surgery where cases were earned.

## SPECIAL ACCOMMODATIONS:

Are you requesting special testing arrangements due to physical impairment(s) or disability?  Yes  No

If you are requesting special accommodations, you must include a comprehensive report from a qualified physician describing your disability and/or any other documentation which will assist in an informed decision by the NBSTSA regarding your request for accommodations as described in the Guidelines for Applying for Special Accommodations.

**Overseas testing:** Are you requesting overseas testing?  Yes  No (If yes, please email NBSTSA at mail@nbstsa.org)

## FEES:

AST/ASA members: Graduates/Students of approved surgical first assistant program \$160. All others \$190

Non-AST/ASA members: Graduates/Students of approved surgical first assistant program \$260. All others \$290

# 2016 CSFA Examination Application... Continued

NBSTSA

If you are a current CST, in addition to the CST/CSFA card/certificate, you can have a card/certificate with only CSFA on it for a \$10 fee. Would you like CSFA-only documents?  Yes  No

**Important:** The following fees are non-refundable: \$60.00 processing fee (included in the examination fee) and \$50.00 rush processing fee.

**RUSH:** Please rush my application. I've enclosed the non-refundable \$50 fee **in addition** to examination fees. Rush processing will process your application within 3-5 business days. Excludes mailing time to the candidate.

### Forms of Payment:

Money Order  Personal Check  Institutional Check  Visa  MasterCard  American Express  Discover

\*Please make checks payable to "NBSTSA".

Billing Address (only if different from applicant info) City State Zip Code

Card Number Security Code Expiration Date \$ Amount Charged

Signature Name (as it appears on card)

### IMPORTANT: All applicants must sign the following statement:

*I do hereby acknowledge that all the information submitted in connection with my application to the certification program is true and correct to the best of my knowledge. I understand that falsified information on this application is grounds for denial of acceptance for examination or certification revocation, and may bar me from future certifications or renewals. I further acknowledge and agree that the NBSTSA may release my examination scores and credentialed status to agencies such as those which regulate the practice of surgical technology, current/potential employers, surgical education programs attended, NBSTSA recognized programmatic accreditation agencies and NBSTSA contracted vendors involved in the process of certification. I understand that NBSTSA CST/CSFA certificants may also have their names and credentials published in various NBSTSA publications from time to time such as when the NBSTSA is congratulating new certificants, etc.*

Printed Name of Applicant Signature of Applicant Date

### IMPORTANT: All pre-graduate examination applicants must sign the following statement:

*I do hereby acknowledge as a pre-graduate examination candidate that proof of graduation MUST be submitted to the NBSTSA within 60 days of my actual examination date in order for my examination results to be released. Failure to produce graduation proof will result in invalidation of examination results and forfeiture of all examination fees.*

Printed Name of Applicant Signature of Applicant Date

**Would you like to receive other communication from the NBSTSA?**  Yes  No

Once approved, NBSTSA provides candidates with an Authorization to Test number (ATT), and both the phone number and web address to contact the testing agency to schedule the examination.

**Retesting:** Surgical First Assistant candidates who are unsuccessful in passing the examination may resubmit an application immediately; however, they are limited to taking two examinations in a six month period. Candidates are required to resubmit an application and payment each time. Photos and proof of graduation are kept on file for one year. Experience Verification Forms are good for two years from the date they were notarized.

**Refund:** The following fees are NON-REFUNDABLE: application processing fees (\$60.00), RUSH processing fee (\$50.00) and/or examination fee after the approval of the application and issuance of an Authorization to Test letter.

### RETURN THIS FORM, ALL NECESSARY DOCUMENTATION AND ENTIRE FEE TO:

The National Board of Surgical Technology and Surgical Assisting, 6 West Dry Creek Circle, Suite 100, Littleton, CO 80120.

TAPE COLOR PHOTO HERE

2x2 headshot photo  
(white background only)  
for identification card.