

# ARIZONA TECHNICAL TESTING INSTITUTE

## APPLICATION FORM

Technician's

Name: \_\_\_\_\_  
(Please print) (Last) (First)

Company: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

- ADOT EMPLOYEES MUST COMPLETE
- ADOT ORG# \_\_\_\_\_ ADOT PG# \_\_\_\_\_
- Supervisor Name \_\_\_\_\_
- Supervisor Phone \_\_\_\_\_

Payment must be made with application form in order to be scheduled. Registration fee includes workbook. A confirmation will be sent in advance. Full refunds will be made for cancelled programs. Prepaid applicants wishing to cancel must contact ATTI no later than five days prior to a scheduled exam to receive a registration refund. Substitutions for paid registrations will be allowed with advance notice.

- |                             |          |
|-----------------------------|----------|
| ( ) Soils/Aggregate Level I | \$450.00 |
| ( ) Asphalt Level I         | \$450.00 |
| ( ) Field Level I           | \$300.00 |
| ( ) Re-examination          | \$50.00  |

Previously failed exam (check one)

- ( ) Soils/Agg. ( ) Asphalt ( ) Field

\_\_\_\_\_  
(Preferred exam date)

Total Enclosed: \_\_\_\_\_

### Credit Card Payment

Cardholder Name: \_\_\_\_\_

CC# \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Card Security Code: \_\_\_\_\_

Billing address: \_\_\_\_\_

Return check and application form to: Arizona Technical Testing Institute  
8050 N. 19th Ave. #419  
Phoenix, AZ 85021