	ABCON SAFETY CONSULTANCY LLC	DOC. REF. NO.	PR-08-F02
		REVISION / ISSUE	00
	Examination Application Form	DATE	30.12.2025
		PAGE	1 OF 2

Full name			
DOB		Nationality	
Address		Tel / Mob No.	
Languages Preferred	English Urdu / Hindi Arabic Other (please specify)		
Company Name			
Designation		ID No: -	

Please tick: ☐ Self-sponsored ☐ Company sponsored

Documents requirements:

1. Valid residence visa copy
2. Two passport size photos
3. Labor card copy
4. Copy of passport or emirates ID:
5. Evidence of working experience
6. Proof of training (if relevant)
7. Driving License (Forklift/Mobile Crane)

Examination

Tower Crane	Mobile Crane	Rigger I
Rigger II	Overhead Crane	Forklift
Signalman		
Other (Pls Specify):-		

In the event of cancellation by Client/Customer, the event fee will be returned less a cancellation of 20%. If less than 3 days' notice is given by you. **ABCON SAFETY CONSULTANCY** has right to cancel the training in case of insufficient registrations or illness of trainer. **ABCON SAFETY CONSULTANCY** will ensure maximum possible notice is given to the attendees and reserve the right to substitute the trainer and modify the course as required.

Note: ABCON SAFETY CONSULTANCY Safety Training and Consultancy LLC as CB is responsible for performance of all personnel, sub-contractors and retains authority for and not to delegate its decision relating to certification, including the granting , maintaining , recertifying , expanding and reducing the scope of the certification and suspending or withdrawing of certification. Moreover, **ABCON SAFETY CONSULTANCY** is responsible for all decisions at the level of appeals-handling process

Certification is not restricted on the grounds of any undue financial or other limiting conditions such as membership of an association or group. **ABCON SAFETY CONSULTANCY** not used procedures to unfairly impede or inhibit access by the applicants. Must have practical training for the operation of cranes, rigger or signal man. Training requirement may change depending upon the competence of candidate. (There is no training provided by the **ABCON SAFETY CONSULTANCY** which make the certification easier or less expensive. All the trainings are done on request from the applicant as per international standard or as per EIAC requirements). As per certification scheme all the candidates must have training not compulsory from **ABCON SAFETY CONSULTANCY** but should show third party certificate for training along with application form.

Candidate Signature:		**Date**	

Information supplied by an individual or employer or from sources other than applicant, candidate or certified is for the confidential use of **ABCON SAFETY CONSULTANCY** and will not be disclosed without the written permission of the individual or employer concerned. This application should be submitted to the Administrator of **ABCON SAFETY CONSULTANCY.**

Important Note:

By signing this application, I verify that a medical professional has found me physically qualified to act according and the training mentioned above according to the relevant standard.

To comply with the relevant provisions of the certification requirements and to supply any information needed for the assessment.

To comply with ABCON SAFETY CONSULTANCY Safety Training and Consultancy LLC examination policy in maintaining the integrity and security of the examination process and be committed to not to release confidential examination materials or participate in fraudulent test-taking practices. Any irregular or improper behavior in examinations that is observed or uncovered by other means will be considered a subversion of the certification process and will constitute grounds for invalidation of a candidate's examination. In addition, ABCON SAFETY CONSULTANCY Safety Training and Consultancy LLC may at its discretion suspend or revokes certification, exclude candidates from future examinations.

{(Examples of irregular or improper behavior include giving or obtaining information or aid, looking at the test material of others, removing examination materials from the test center, bringing unauthorized items, including watches or electronic devices (e.g., Laptops, cell phones, etc.), into the examination)}

Failing to comply with time limits or instructions, talking, or other disruptive behavior. Test administrators may intervene to stop any of the foregoing and inform the certification Scheme Committee.

The certified person shall inform the **ABCON SAFETY CONSULTANCY**, without delay, of matters that can affect the capability of the certified person to continue to fulfill the certification requirements.

To make claims regarding certification only with respect to the scope for which certification has been granted,

Not to use the certification in such a manner as to bring the certification body into disrepute, and not to make any statement regarding the certification which the certification body may consider misleading or unauthorized.

To discontinue the use of all claims to certification that contains any reference to the certification body or certification upon suspension or withdrawal of certification, and to return any certificates issued by the certification body, and

Not to use the certificate in a misleading manner, which will otherwise lead to prosecution.

In addition, I agree to abide by the conditions of certification and agree to inform the certifier of any changes affecting the status of the certification.

If you have any known person in ABCON SAFETY CONSULTANCY Safety Training and Consultancy LLC please mention the name.

For the applicant of special needs has opportunity to declare, within reason, a request for accommodation.

If the candidate's language is not English, the certification of person center of **ABCON SAFETY CONSULTANCY** will provide interpreters.

Candidates Rights:

- Information supplied by an individual or employer is for the confidential use of ABCON SAFETY CONSULTANCY Safety Training and Consultancy LLC and will not be disclosed without a written permission of the individual or employer concerned.
- All Certified Persons will be received a certification and ID card.
- The candidate not passing the first written or practical exam or both has the right to re-sit with 50% of exam fees for one chance during 2 months from the last examination, then if he didn't pass, he needs to re-register for new certification from the beginning with full charge.
- For the applicant of special needs has opportunity to declare, within reason, a request for accommodation.

FOR ABCON SAFETY CONSULTANCY OFFICIAL USE ONLY

1. **Documents verification** ☐
2. **Meet with requirements** ☐
3. **Any special need** ☐

ADMINISTRATION INCHARGE _____ **Date of Review** _____ **Work Order No(If Confirmed for Examination)** _____

ELEGIBLE ☐ **NOT ELEGIBLE** ☐

Candidate Signature:		Date	