

Test Confidentiality and Attestation

The NAB NHA Examination as well as the NC State Board of Examiners for Nursing Home Administrators State Examination contains confidential information. Since some of the material contained on these examinations is used on future administrations of the examinations, you are cautioned that you must not comment to other applicants, potential applicants, or any other person regarding the contents of these examinations.

Please read, sign and send this form back to us at the following address:

**NC State Board of Examiners for
Nursing Home Administrators
3733 National Drive, Suite 110
Raleigh NC 27612**

You will not be permitted to sit for the examination until this signed document is returned to the Board Office.

I agree not to compromise or attempt to compromise the NAB NHA or the NC State Board of Examiners for Nursing Home Administrators State Examination by disclosing any information, questions, or answers on these examinations. Prohibited activities which might compromise these examinations include, but are not limited to: reproducing or assisting another by any means to reproduce or attempt to reproduce any portion of the examination, by any means, including electronic transmission or memorization; having any person (whether paid or unpaid) take the examination on your behalf; engaging in face-to-face, written, or electronic discussions, including on blogs, listservs, chat rooms, email or any social media application, concerning the content of the examination for personal commercial, or other reasons; and selling, distributing, buying, receiving or having unauthorized possession of any portion of the examination, specifically any questions or answers.

With my signature below, I understand that failure to observe the confidentiality of the NAB NHA Examination or the NC State Board of Examiners for Nursing Home Administrators State Examination may result in disciplinary action by the Board as outlined in the Rules and Statutes for the Licensing of Nursing Home Administrators.

Name Printed

Date

Name Signed