Designer Inspector Series
Test Information

The following instructions and rules must be followed by applicants taking Lightning Protection Institute tests and adhered to by all proctors administering such tests:

1. Each test is to be completed and returned to the proctor within a two (2) hour time limit.
2. These are **not open book tests**. All books, notebooks, palm pilots, laptops, notes or any other studying/electronic device (other than calculator) are to be left outside the testing room.
3. Applicants may use a regular ruler, an Engineering Scale ruler, an Architectural Scale ruler (both are triangular in shape), pencils, pens, a calculator, and clean paper during the test.
4. **No phone calls** are permitted during or between the test periods. Cell phones must be turned off and left outside testing room.
5. When each test is completed, the proctor will take **all** papers from the applicants (answer sheet, test questions, drawings/illustrations and all scratch papers) **except** the page titled “Testers”, and mail them to the LPI office.
6. The LPI office will grade the tests and notify applicants of their test results **by mail** within **10 business days** of receipt of the tests at the LPI office.
7. **All tests and materials not used within 60-days of receipt by the proctor must be returned to the LPI office.** Applicants must reapply and pay the full fee if the tests are resent. **No refunds will be given for tests in any way, whether completed or not completed.**
8. Should a test applicant request any information, other than his/her score, s/he must make this request in writing to the LPI. We will not accept phone inquiries nor will we provide any sample questions or study “help guides” to individuals who have not passed.

In some instances, after carefully reviewing the tests and the participants’ answers, the LPI may find it necessary to contact the proctor and ask for a written description of the testing circumstances for the individuals taking the test and a copy of the actual seating chart used in the testing session. If it is determined that cheating on the tests has occurred, the test takers will be disqualified from the LPI Certification Program altogether.

On the rare occasion that a test has a duplicate page, page missing, or appears to have a printing error in one of the sections, please stop testing at once and notify the Proctor. The Proctor is to make note of the time the individual has taken to complete the test thus far and call the LPI office immediately at 1-800-488-6864. We will overnight mail a corrected copy and give specific instructions to the Proctor regarding amount of completion time allowed to finish the test.

If you have any questions regarding our testing procedures, please contact the LPI office by phone at 1-800-488-6864 or by e-mail at LPI@lightning.org. Thank you.
Please print out the following Registration Form, complete, sign, and return by mail or fax with your payment to the LPI office. Complete Proctor information must be included.

Lightning Protection Institute  
333 Peterson Road, Suite F  
Libertyville, IL 60048  
Phone: 800.488.6864 or 224.433.6680  
Email: LPI@lightning.org  Website: www.lightning.org

**REGISTRATION FORM FOR**  
**CERTIFICATION TESTS**

1. **Full Name:**

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<thead>
<tr>
<th>Last</th>
<th>First</th>
<th>Middle Initial</th>
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**Address:**

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<th>Address for Registration</th>
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**Phone & Fax:**

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<th>Phone with Area Code</th>
<th>Fax with Area Code</th>
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**E-Mail Address:**

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<th>E-Mail Address</th>
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2. **Personal Data:**

<table>
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<tr>
<th>Date of Birth</th>
<th>Social Security Number</th>
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<table>
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<tr>
<th>Current Employer</th>
<th>City/State</th>
<th>Zip Code</th>
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<tr>
<th>Your Current Position or Job Description</th>
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3. **Education:** *(Circle highest grade or year attended at each school level)*

   - High School: 9 10 11 12
   - Secondary: 1 2 3 4 More than 4

   - Trade or Technical School
   - College/University
   - Degree(s): ***************
4. **Proctor Name & Address:**

__________________________________________________________

__________________________________________________________

5. **Experience in Lightning Protection:**

__________________________________________________________

__________________________________________________________

6. **Please answer the following fully. If none, write “None”**

A. My work experience in lightning protection installation, systems design and/or estimating totals ________ months.

B. My work experience in a related building trade, such as roofing, siding, carpentry, plumbing, etc., totals ________ years.

C. My work experience as an electrician totals ____________ years.

Please describe any home study courses, seminars or workshops you have completed or attended, including names, dates and places:

__________________________________________________________

__________________________________________________________

7. **Circle all tests you want to take:**

Designer Inspector Test 1  Designer Inspector Test 2

8. **Please read and sign the following statement:**
I certify that all answers I have provided on this Registration Form are complete and factual.

_________________________________________  ______________________
Signature                                      Date

*Mail this Registration, along with your check to:  Lightning Protection Institute
333 Peterson Road, Suite F
Libertyville, IL 60048

*The LPI does not accept faxed Registration Forms. If you wish to pay with Credit Card you may do so through our “STORE” listed in the top right-hand corner of our website. Thank you.*