



CLIENT ATTESTATION STATEMENT FOR SELF-EMPLOYED CANDIDATES

In order to be eligible to take the initial certification examination in infection prevention and control (CIC® examination), a self-employed candidate (i.e. independent consultant) must have the following information provided by at least three clients. Candidates should give this form to the client, who then fills it out and submits it to the CBIC Executive Office.

Please complete this form, checking relevant boxes in each section of the form. Return the original signed form to the CBIC Executive Office, who will add it to the candidate's application. If you have questions, please contact the CBIC Executive Office at 414/918.9796.

STATEMENT FROM CLIENT

I verify that the following statement is accurate (Check all that are applicable):

The applicant named below has provided infection prevention and control services to:

- my office
- organization
- company
- other _____

I verify that the applicant's services included all of the indicated elements I have marked below in a satisfactory and acceptable manner:

- Identification of infectious disease processes;
AND
- Surveillance and epidemiologic investigation;
AND
- Preventing and controlling the transmission of infectious agents;
AND
- At least 2 of the following additional activities:
 - Employee/occupational health;
 - Management and communication;
 - Education and research;
 - Environment of care;
 - Cleaning, sterilization, disinfection, and asepsis;
 - Consultation on infection prevention and control, risk assessment, and prevention and control strategies;
 - Other – please explain:

Applicant's Name: _____

Client Name (please print):

Client Title:

Daytime Phone No.:
()

Client Email:

Client Organization:

Street/P.O. Box:

City:

State/Province:

Country:

Zip/Postal Code:

Client Signature:

Date:

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CBIC Executive Office
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