ITCA Application

Information Technology Certified Associate
An ISACA® Certification

APPLICANT DETAILS

FULL NAME: _____   ISACA ID: _____

EMAIL: _____   PHONE NUMBER: _____

STEP 1. PASS ALL REQUIRED EXAMS

Check each exam that you have passed

Note: Applicants for the IT Certified Associate are required to have passed all five of the exams included in the program. If you have not yet passed each necessary exam, you can review them all and register for any you are missing here.

Cybersecurity Fundamentals   **Computing Fundamentals**   **Data Science Fundamentals**

Software Development Fundamentals   **Networks & Infrastructure Fundamentals**

STEP 2. SUBMIT APPLICATION PAYMENT

Applicants must pay a US $25.00 Application Processing Fee before the application can be fully processed. Submit your payment at: *www.isaca.org/bookstore/certification-related-products/itca_app*
Note: This fee is waived for Student Members and Recent Graduate Members of ISACA.

STEP 3. REVIEW AND SIGN TERMS & CONDITIONS AGREEMENT

Continuing Professional Education (CPE) Policy
I hereby apply to ISACA for the ITCA certification in accordance with and subject to the procedures and policies of ISACA. I have read and agree to the conditions set forth in the Application for Certification and the Continuing Professional Education (CPE) Policy in effect at the time of my application, covering the Certification process and CPE policy.

Code of Ethics
I agree: to provide proof of meeting the eligibility requirements; to permit ISACA to ask for clarification or further verification of all information submitted pursuant to the Application, including but not limited to directly contacting any verifying professional to confirm the information submitted; to comply with the requirements to attain and maintain the certification, compliance with ISACA's Code of Ethics, standards, and policies and the fulfillment of renewal requirements; to notify the ISACA certification department promptly if I am unable to comply with the certification requirements; to make claims regarding certification only with respect to the scope for which certification has been granted; and not use the ITCA certificate or logos or marks in a misleading manner or contrary to ISACA guidelines.

Truth in Information
I understand and agree that my Certification application will be denied, and any credential granted me by ISACA will be revoked and forfeited in the event that any of the statements or answers provided by me in this application are false or in the event that I violate any of the examination rules or certification requirements. I understand that all certificates are owned by ISACA and if my certificate is granted and then revoked, I will destroy the certificate, discontinue its use and retract all claims of my entitlement to the Certification. I authorize ISACA to make any and all inquiries and investigations it deems necessary to verify my credentials and my professional standing.

3rd Party Information Sharing
I acknowledge that if I am granted the Certification, my certification status will become public, and may be disclosed by ISACA to third parties who inquire. If my application is not approved, I understand that I am able to appeal the decision by contacting ISACA. Appeals undertaken by a Certification exam taker, Certification applicant or by a certified individual are undertaken at the discretion and cost of the examinee or applicant. By signing below, I authorize ISACA to disclose my Certification status. This contact information will be used to fulfill my Certification inquiries and requests.

Contact Policy
By signing below, I authorize ISACA to contact me at the address and numbers provided and that the information I provided is my own and is accurate. I authorize ISACA to release confidential Certification application and certification information if required by law or as described in ISACA's Privacy Policy. To learn more about how we use the information you have provided on this form, please read our Privacy Policy, available at https://www.isaca.org/privacy-policy

Usage Agreement
I hereby agree to hold ISACA, its officers, directors, examiners, employees, agents and those of its supporting organizations harmless from any complaint, claim, or damage arising out of any action or omission by any of them in connection with this application; the application process; the failure to issue me any certificate; or any demand for forfeiture or re-delivery of such certificate. Notwithstanding the above, I understand and agree that any action arising out of or pertaining to this application must be brought in the Circuit Court of Cook County, Illinois, USA, and shall be governed by the laws of the State of Illinois, USA.

I understand that the decision as to whether I qualify for certification rests solely and exclusively with ISACA and that the decision of ISACA is final.

I have read and understand these statements and I intend to be legally bound by them.
A handwritten signature or verifiable digital signature is required.

APPLICANT SIGNATURE: _____   DATE: _____

STEP 4. SUBMIT APPLICATION

Please submit your application online at *https://isaca.force.com/support/s/application-submission*

Submitted applications take approximately two-to-three weeks to process. Upon approval, you will be notified via email.