

Institute for Professionals in Taxation
Policy and Application on Retake Examinations
Revised November 13, 2004

Retake - Any student who fails the school examination after completing the course will be given the opportunity to retake the examination, regardless of the score achieved on the original examination, provided:

- a. The examination is retaken within one year of the date of the original exam.
- b. A non-refundable fee of \$75 is paid to cover the cost of administering the additional examination.
- c. Applicable policies and procedures for scheduling and processing a reexamination are the same as those for a challenge examination.
- d. The retake exam shall be different than the examination for which the student failed to make a passing grade.
- e. Only one reexamination is available to any student failing to obtain a passing grade. Any student failing the re-examination will be required to retake the applicable school before being allowed to again retake the examination.

III. Passing grade

For purposes of grading, any student who answers 70 percent or more of the question correctly on a school retake examination will be considered to have successfully completed the examination. Students will be advised only that they passed or failed the examination. No numerical grades will be given.



INSTITUTE FOR PROFESSIONALS IN TAXATION
APPLICATION FORM TO RETAKE FINAL SCHOOL EXAM

*Retake exams must be completed 1 year from the date of the school.

IPT Membership ID # _____] \$75 non-refundable fee enclosed (Per School)

Applicant Name: _____ **Title:** _____

Company: _____

Address: _____

E-Mail: _____ **Telephone: ()** _____

I wish to retake the final exam for the school marked below which I attended in _____(year).

<input type="checkbox"/> Sales Tax School I
<input type="checkbox"/> Sales Tax School II
<input type="checkbox"/> Property Tax School
<input type="checkbox"/> Intermediate Real Property Tax School
<input type="checkbox"/> Intermediate Personal Property Tax School
<input type="checkbox"/> Basic Income Tax School
<input type="checkbox"/> Advanced Income Tax School

Signature _____ Date _____

Preferred date range and choice of locations to retake exam:

Date Range **Location – 1st Choice** **Location – 2nd Choice**

Return with the \$75 (per School) non-refundable application fee to:

Institute for Professionals in Taxation
1200 Abernathy Rd., NE, Suite L-2
Atlanta, GA 30328 Fax (404)240-2315

Method of Payment			
<input type="checkbox"/> Check	<input type="checkbox"/> American Express	<input type="checkbox"/> MasterCard	<input type="checkbox"/> Visa
Amount of Payment \$ _____			
Card Number: _____			

Expiration Date: _____

Signature: _____

Note: Indicate Complete Billing Address If Different Than Registration Address Below.

Billing Address: _____