

MASTER CERTIFIED HEALTH EDUCATION SPECIALIST (MCHES®)



EXAM HANDBOOK

April 2025

PLEASE READ THIS HANDBOOK IN ITS ENTIRETY
BEFORE COMPLETING THE APPLICATION.



NCHEC

**NATIONAL COMMISSION FOR
HEALTH EDUCATION
CREDENTIALING, INC.**

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Please read this handbook in its entirety BEFORE completing the application.



WELCOME

The National Commission for Health Education Credentialing, Inc. (NCHEC) would like to thank you for considering certification in the field of Health Education and Promotion. Recognition as a nationally and internationally master certified health education specialist (MCHES®) will assist you in whichever career setting you choose. Certification defines your commitment to the field of Health Education and Promotion and positions you to continue your professional development while upholding the national and international accreditation standards that our credentials attest to. Certification is a significant achievement, and validates the knowledge and skills you have obtained through your academic preparation.

QUICK CONTACT

For general information about certification or exam applications:
lcallwood@nchec.org

To schedule, reschedule or cancel an exam appointment you MUST:

- 1) Notify PSI (nchec.org click LOGIN or call **855-340-3713**.)
- 2) Notify NCHEC at tcole@nchec.org or call **888-624-3248**.

For test site emergency closure information, visit <https://www.psonline.com/openings>

MISSION

The mission of NCHEC is to enhance the professional practice of Health Education by promoting and sustaining a credentialed body of Health Education Specialists. To meet this mission, NCHEC certifies health education specialists, promotes professional development, and strengthens professional preparation and practice.



ORGANIZATION OVERVIEW

The National Commission for Health Education Credentialing, Inc. (NCHEC), founded in 1988 as a non-profit, tax-exempt organization, develops and administers national competency-based examinations to entry- and advanced-level health education specialists.



BENEFITS OF NATIONAL CERTIFICATION THROUGH NCHEC

NCHEC's voluntary professional certification program establishes a national standard for individual health education practitioners. It is based on the Eight Areas of Responsibility; a comprehensive set of Competencies and Sub-Competencies that have been verified by a job practice analysis. It differs from state and local certifications and registries in that the requirements do not vary from one locale to another.

National certification benefits practitioners and the public by:

- Establishing a national standard of practice for all health education specialists
- Attesting to the individual health education specialists knowledge and skills
- Assisting employers in identifying qualified health education practitioners
- Developing a sense of pride and accomplishment among certified health education specialists
- Promoting continued professional development for health education specialists

THE MASTER CERTIFIED HEALTH EDUCATION SPECIALIST (MCHES®) CREDENTIAL

A MCHES® is an individual that has:

1. Met required academic preparation qualifications
2. Successfully passed a competency-based examination administered by the National Commission for Health Education Credentialing, Inc.
3. Satisfied the continuing education requirement to maintain the national credential

Job Settings for CHES® and MCHES®

Healthcare/Hospital
Government
University
Business
Community/Non-Profit
Schools

Source: Health Education Specialist Practice Analysis 2020 (HESPA 2020)

Master Certified Health Education Specialists practice within varied settings across the country and overseas. The verified skill-sets of health education specialists are a valuable asset in a variety of career settings, and denote competency, commitment, versatility, and independent critical thinking skills.

MCHES® EXAMINATION DESCRIPTION:

The Master Certified Health Education Specialist (MCHES®) examination is a competency-based tool used to measure possession, application and interpretation of knowledge in the Eight Areas of Responsibility for Health Education Specialists delineated by the most current US-based practice analysis study. The exam reflects the **entry- and advanced-level Sub-competencies of these Areas of Responsibility as found in A Competency Based Framework for Health Education Specialists 2020.**

The MCHES® credential is hierarchical, meaning that MCHES® are competent in all entry-level (CHES®) skills, in addition to more advanced-level skills.

Consisting of 165 multiple-choice questions in two blocks (150 scored and 15 pilot tested), the MCHES® examination is offered only in computer-based format at more than 400 PSI test centers worldwide. Candidates are allotted 3 hours to complete the examination questions. Total seat time at PSI Test Centers, including tutorials and surveys, is 3.5 hours.

NONDISCRIMINATION/ FAIRNESS

NCHEC does not discriminate against any individual on the basis of race, ethnicity, religion, sex, gender identity, age, disability, sexual orientation, status as a veteran, or other legally protected status.

NCHEC's adheres to a formal application review process in accordance with established criteria. This process provides assurance to the public that the eligibility review is impartial and fair. For more information on NCHEC's Nondiscrimination/Fairness policy and procedures regarding this policy, contact NCHEC at 888.624.3248 or email admin@nchech.org.



MCHES® EXAM FEES



MCHES® EXAM FEE SCHEDULE AND DEADLINES

The MCHES® exam is offered in both the spring and fall (April and October) for a period of ten days. Visit nchec.org/exam for future exam dates. The current exam schedule is as follows:

*Fee is determined by the date of payment.

April 23-May 3, 2025	CHES® Fee*	Non-CHES® Fee
Early Bird Registration Deadline: 11/1/2024-11/31/2024	\$295	\$345
Regular Registration Deadline: 12/1/2024 - 1/31/2025	\$355	\$405
Final (Late) Registration Deadline: 2/1/2025 - 2/28/2025	\$415	\$465

Fees listed include a \$100 nonrefundable processing fee for those who do not meet the eligibility requirements or choose to withdraw from the exam.

Applications must be postmarked on or before the final deadline dates.

PAYMENT METHODS

NCHEC accepts VISA, MasterCard, Discover, and American Express. Payment must be made at the time of application. If paying by mail, NCHEC will also accept U.S. checks or money orders. For questions about application payments, contact admin@nchec.org.



APPLYING FOR THE MCHES® EXAM

MCHES® EXAM ELIGIBILITY REQUIREMENTS

MCHES® Exam Eligibility Requirements includes both academic and experience requirements.

- For CHES®: A minimum of the past five (5) continuous years in active status as a Certified Health Education Specialist. (No additional documentation is needed)
- For Non-CHES® or CHES® with fewer than five years active status AND five years' experience:
 - ✓ A Master's degree or higher in Health Education, Public Health Education, School Health Education, Community Health Education, etc.,

OR

a Master's degree or higher with an academic transcript reflecting at least 25 semester hours (37 quarter hours) of course work in which the Eight Areas of Responsibility of Health Education Specialists were addressed.

AND Five (5) years of documented experience as a health education specialist - full-time or part-time. Volunteer experience does not qualify towards the five years of experience as a health education specialist.

- ✓ To substantiate experience in the health education field, applicants must submit:
 1. Two verification forms from a current or past manager/ supervisor, and/or a leader in a health education professional organization.
 2. A current curriculum vitae/ resume

Any health education experience submitted by the applicant can be full-time, part-time and/or intermittent employment. Current employment at the time of application is not necessary, but the applicant must meet the requirement of five years' experience. On the verification form it must be indicated, and in the curriculum vitae/resume it must clearly be shown, that the applicant has been engaged in the Health Education Areas of Responsibility for at least five years (experience may be prior to completion of graduate degree). Volunteer experience is not applicable.

Please note you do not have to be CHES® prior to becoming MCHES® as long as you meet the eligibility requirements.

ELIGIBILITY GUIDELINES

Applicants for the MCHES® exam must complete all 25 semester hours/37 quarter hours of coursework that clearly align with the Eight Areas of Responsibility of Health Education Specialists. The following guidance is offered to assist applicants without an earned graduate degree in health education, seeking to qualify for the MCHES® exam based on the 25-semester hour minimum, 15 of which are at the graduate-level.

A minimum of 12 semester hours/18 quarter hours of process courses that clearly align with the Eight Areas of Responsibility. 9 Semester hours must be graduate level.

A maximum of 9 semester hours/14 quarter hours may be from topic-focused courses that include elements contained in the Eight Areas of Responsibility of Health Education Specialists.

A maximum of 6 semester hours/9 quarter hours may be from other courses that include elements contained in the Eight Areas of Responsibility, Competencies, and Sub-Competencies for Health Education Specialists.

Course descriptions and syllabi may be provided to determine if courses are eligible.

PRESCREEN SERVICE

If you are unsure of your eligibility for the MCHES® exam, there is an optional "prescreen" service offered to non-CHES® applicants to provide an eligibility determination. This option should ONLY be used if you are not sure you meet the academic eligibility requirements for the MCHES® exam. If your prescreen application is found eligible, the \$25 prescreen fee will be deducted from the final exam application fee and additional instructions will be emailed to you. If ineligible, course deficiencies will be identified and guidance will be provided.

If you are interested in taking advantage of the prescreening service, visit our Web site, www.nchec.org/exam and apply for the prescreen option online. You can also contact NCHEC to receive a paper prescreen form.

PRESCREEN SCHEDULE:

April Cycle: **November 1 – January 31**

October Cycle: **May 1 – July 31**

HEALTH EDUCATION CODE OF ETHICS

NCHEC adheres to the Health Education Code of Ethics established by the Coalition of National Health Education Organizations (CNHEO). See <http://cnheo.org/ethics-of-the-profession.html>. This policy serves as a central guide and reference for all Health Education Specialists in ensuring their day to day activities are in line with professional conduct and industry standards.

***By applying for certification you are attesting to reviewing and abiding by the Health Education Code of Ethics.**



SUBMITTING AN APPLICATION

HOW TO APPLY

We recommend online applications for expediency and allowing the applicant to track the status of the application.

Reminder: Enter your first and last name on the application EXACTLY as it should appear on the MCHES® certificate. **It is your responsibility to notify NCHEC of any changes in name and/or address before taking the exam.**

WHAT YOUR APPLICATION SHOULD INCLUDE:

- **Completed application form**
- **Official transcript** reflecting school name(s), degree(s), date(s) awarded and all completed coursework (application cannot be processed without a transcript). If sent separately, transcripts should be submitted no later than 30 days after application submission and prior to the final deadline or you will be subject to increased exam fees. If you have actively held the CHES® certification for greater than 5 years, you will not need to submit an official transcript.

- **Overseas transcripts** MUST be translated into American credits through a transcript translation service before submitting your application for review.
- **Application fee**-The application fee **INCLUDES** a **\$100 non-refundable processing fee** (if the candidate is found ineligible or withdraws from the exam)

NON-CHES® OR less than 5 year CHES® Applicants must also include:

- Two Verification Forms
- Curriculum Vitae (CV)/Resume

Exam applications, university transcripts and any additional supporting documentation become the property of NCHEC. These items will not be returned to the exam applicant or forwarded to a third party. Note: falsification of any documentation may result in suspension or revocation of the credential or denial of eligibility for future exams.

DATES TO REMEMBER

Final application deadline/April exam: February 28

Final application deadline/October exam: August 31

INCOMPLETE APPLICATIONS

Incomplete applications will not be processed until all necessary information is received by NCHEC, including payment. Exam fees are not refundable for incomplete applications. NCHEC is not responsible for missing information, such as transcripts sent separately. All documentation must be submitted by final deadline. Delays may result in an automatic transfer to the next exam date with an additional \$125 transfer fee. Please be sure to include all items at the time of application.

MAKING CHANGES TO YOUR APPLICATION

It is the applicant's responsibility to notify NCHEC of any changes in address or contact information. Address changes can be made by visiting our Web site, nchech.org, and logging on with your username and password or by contacting the NCHEC at admin@nchech.org or 888.624.3248. Please note that if changes are not reported to NCHEC prior to your exam appointment, you may not be able to gain entry into the testing center.

APPLICATION CHECKLIST

For Non-CHES® or CHES® with fewer than five years of active status:

- Official Transcript showing a minimum of a completed master's degree with either a specific health education major OR with 25 credits specific to the Areas of Responsibility of Health Education Specialists
- Two verification forms
- A curriculum vitae/ resume
- Application Form
- Application Fee

CHES® that have been active for the past five years:

- Application form
- Application fee



Applicants who have been determined to have fulfilled the eligibility requirements for the MCHES® exam will receive an "Authorization to Test" (ATT) letter. This notification will be sent to your registered email address, and will include instructions on how to schedule your exam appointment. You can schedule your appointment online at www.nchec.org/ and click login or by calling the PSI support line at **855-340-3713**.

IF YOU ARE INELIGIBLE FOR THE MCHES® EXAM

Ineligible applicants will be notified by email. If you are found ineligible to sit for the MCHES® exam, your application fee will be refunded, minus the nonrefundable application processing fee of \$100. You can re-apply for the examination in the future, should you complete the coursework or work experience necessary for eligibility. You do have the right to appeal your denial of eligibility.

FILING AN APPEAL REGARDING ELIGIBILITY

1. An appeal will only be considered if postmarked, emailed, or faxed within thirty (30) calendar days following the email date in which the Appellant was notified of the adverse decision.
2. NCHEC strongly suggests appeals be sent by certified mail or overnight courier service (such as FedEx) with return receipt requested. Appeals by facsimile or email are accepted.
3. A fee of twenty-five dollars (\$25) must be paid and is not refundable if the appeal is denied.
4. An appeal must be submitted in writing (preferably typewritten) to the NCHEC Executive Director who will, in turn, submit it to the appropriate NCHEC decision-making body. The appeal must contain the original notification from NCHEC showing the date of the adverse decision.
5. The appeal should identify the adverse decision being appealed and explicitly state the reasons for the appeal. The appeal shall set forth any new or additional information to be considered. To expedite the appeal process, applicants are encouraged to include course descriptions, syllabi and any other pertinent information about specific courses in which the major emphasis was health education. Support documents provided by applicants will become property of NCHEC and not be returned to appellants.
6. The only additional information that may be submitted after the initial filing is that which is requested by the appropriate NCHEC decision making body.

Please visit this link for the full appeal policy <http://www.nchec.org/mches-exam-eligibility>.

REQUESTS FOR TESTING ACCOMMODATIONS

In accordance with the Americans with Disabilities Act (ADA), NCHEC will strive to ensure that no individual with a disability is deprived of the opportunity to take the examination solely by reason of that disability.

A candidate who has a disability may request accommodations and arrangements to take the examination. Such requests must be completed through our testing vendor, PSI, **BEFORE** you schedule your exam appointment. Please start this process a minimum of 15 days prior to your preferred testing date. [Click on the link below to access the online accommodation request form. ADA request link](#)

Verification of disability is required. Documentation by a competent individual (e.g. physician) of a specific disability must be submitted to PSI via the above link **once your application has been approved by NCHEC**. All requests are evaluated on a case- by-case basis and are subject to approval. Test center personnel will be prepared to handle approved accommodations.

Note: Eligible candidates may NOT schedule a test time/location prior to approval of accommodations. All requests for testing accommodations must be received 15 business days prior to the preferred test date.



SCHEDULING YOUR EXAM APPOINTMENT

NCHEC certification exams are administered in a computer-based format through PSI, NCHEC's test delivery vendor, at technology-enabled testing centers across the United States, as well as additional global sites. PSI is a leader in computer based test administration with best-in-class testing facilities and a trained, fully certified testing staff.

Once you have been found eligible to sit for the MCHES® exam you will receive an "Authorization to Test" (ATT) letter which will include instructions on how to schedule your exam appointment. You can then schedule your appointment online at www.nchec.org click LOGIN or by calling the PSI support line at 855-340-3713.

Applicants are strongly encouraged to schedule an exam appointment right away to obtain a preferred test date, time and location. Do not wait until the exam testing window opens to schedule a time slot, as appointments are scheduled on a first-come, first-serve basis. should a candidate be unable to schedule an exam appointment within the exam testing window, fees will not be refunded or transferred.

It is the responsibility of the candidate to confirm the correct date and time of the scheduled exam appointment. **NCHEC will not be able to reschedule missed appointments.** Candidates are asked to arrive at least a **minimum of 30 minutes** prior to your exam time to allow for check-in.

Eligible candidates may NOT schedule a test time/location through PSI until all accommodations documents have been submitted and approved by PSI. All requests for testing accommodations must be received 15 days business days prior to the preferred testing date.

When scheduling your appointment with PSI, please be prepared to submit the following information:

First and last name exactly as it appears on your ATT, which should match the valid, unexpired, government-issued ID you will use as proof of identity at the testing center. Military IDs will not be accepted if testing via LRP.

NOTE: If your ID does not EXACTLY match the first and last name on your application, YOU WILL NOT BE ADMITTED TO THE TEST CENTER.

Candidates will receive an email from PSI confirming their exam appointment date/time, identification requirements, and driving directions. To schedule your appointment, visit nchec.org and click LOGIN, or call PSI at 855-340-3713.



CHANGES TO YOUR EXAM APPOINTMENT

RESCHEDULING YOUR APPOINTMENT

We understand that schedules can change. However, this option is available and intended to be used only if you need to change your appointment time within the same testing window. Please note that rescheduling is NOT the same as transferring your exam cycle.

- Rescheduling your testing appointment can be completed by contacting PSI **48 or more hours prior** to your scheduled appointment.
- Requests less than **2 calendar days prior** to the scheduled appointment will not be granted and will be treated as a **No-Show (see page 11)**.

If a candidate is unable to test during the scheduled exam window and fails to reschedule, fees will not be refunded except in the case of a medical or personal emergency. In the case of such an emergency, supporting documentation will need to be supplied to NCHC within 30 days after your scheduled exam test date.

CANCELLING/WITHDRAWING

This option is available and intended to be used if you are **not anticipating taking the exam in the future**. Cancellation requests must be submitted in writing directly to NCHC. Requests must be received no later than the final registration deadline of 2/28/2025. You will be refunded the exam fee minus the **\$100 nonrefundable processing fee**. If NCHC does not receive notification that you have withdrawn/cancelled before the final registration deadline, candidates will automatically be considered a “No-Show” and all registration fees are forfeited. If you have scheduled an exam appointment, you must cancel through PSI as well.

DEFERRING/TRANSFERRING

This option is available for candidates who wish to reschedule/transfer/defer to the next exam testing window.

Step 1. If you have a scheduled appointment, you must first cancel your appointment through the PSI website portal or hotline before the final registration deadline

Step 2. You must then submit a written request (email acceptable) directly to NCHC, no later than the final registration deadline for the exam testing window in which you applied or registered. The fee to transfer/defer to the next exam testing window is **\$125**.

Important note: Please make sure to follow this two-part process carefully for a successful transfer. If both steps are not completed within the necessary timeframe, candidates will move into the “No-Show” category, as outlined below, and registration fees are forfeited.

Refunds are only available for the exam cycle in which you first applied. Refunds on previously transferred exam appointments are not available.

IF YOU DO NOT KEEP THE APPOINTMENT (NO-SHOW)

If you do not take the exam on the scheduled date, arrive to the testing center after your scheduled exam time, did not cancel or reschedule within the required time frame, or never scheduled an appointment, you are considered a “No-Show.” As NCHC must pay for each candidate’s scheduled seat, you would forfeit all exam registration fees as a No-Show. Please make sure to schedule your appointment ahead and arrive on time to avoid becoming a No-Show.

“No-Show” candidates can register for the next exam window for an additional **\$150 rescheduling fee**. **This reduced fee is only valid for the next scheduled exam date; thereafter, full registration is required.** NCHC will send new registration instructions for the next scheduled exam testing window within 30 days from the closing of the current exam testing window. Unexpected circumstances will be considered and fee waiver requests will be reviewed for medical or personal emergencies as described below.

IN CASE OF PERSONAL OR MEDICAL EMERGENCY

For the purpose of the NCHC certification programs, medical or personal emergencies are defined as unplanned events affecting the candidate or immediate family member(s) (spouse, child or parent), which arise within five days of the scheduled exam appointment and prevent the candidate from taking the exam, or from rescheduling or cancelling an exam appointment.

An event that can be anticipated cannot be considered a medical or personal emergency. A candidate’s inability to take the exam due to work commitments or insufficient or inappropriate preparation cannot be considered a personal emergency.

SUMMARY OF CANCELLATION/TRANSFER/RESCHEDULE POLICIES

CATEGORY	EXPLANATION	GUIDELINES	REFUND OR ADDITIONAL FEES
Reschedule	Changed your exam date within the exam testing window	2 days or more before scheduled exam date	No additional FEES.
Cancel or Withdraw	Withdrew from your exam	On or before Late Application Deadline	Full exam fee less \$100 non-refundable application fee
	Withdrew from your exam	After Late Application Deadline	No refund. Forfeit exam fees
Defer or Transfer	Transfer to next exam cycle	By final registration deadline for the testing window in which you applied or registered	No refund. Additional fee of \$125 payable in next cycle
No Show	No-Show candidate	<p>Did not appear for exam on scheduled date</p> <p>Transferred to the next exam cycle after the final registration deadline for the exam testing window in which you applied or registered.</p> <p>Arrived at the test center more than 30 minutes late</p> <p>Did not have proper identification</p> <p>Did not schedule an exam appointment</p>	No refund. Forfeit exam fees. Can retest in next exam cycle only for \$150 payable at next cycle
Emergency	Medical or personal emergency	Case by case basis	Transfer to next exam with proper documentation fee may be waived in extenuating situations



PREPARING FOR THE MCHES® EXAM

EXAM FORMAT AND DURATION

The MCHES exam consists of 165 multiple choice (four response) questions; 15 of the items are used as pretest items and do not contribute to the final score on each exam. The candidate is not told which items are pretests and which are scored. Each question contains four possible multiple choice answers; only one answer is correct. Exams are delivered only in a computer based format available at PSI test centers. Candidates are allotted 3 hours to complete the exam. Considering the tutorial, consent and post exam survey, the duration of the exam appointment is a maximum of 3 hours and 30 minutes.

ALLOCATION OF TEST CENTER TIME	
Introduction and Tutorial	10 minutes
Exam	3 hours (180 minutes)
Satisfaction Survey/Completion Notice	Less than 10 Minutes *
*Estimated timeframes	

Each section shows a countdown timer on the screen, and each section is separate and time-independent. **Minutes do not roll over.** For instance, if a candidate spends less time in the introduction, extra minutes are not rolled over to the exam portion. For your convenience, *Appendix B* provides the text of the Non-Disclosure/Confidentiality Agreement you will be asked to agree to prior to taking the exam. Please review it prior to your exam date so that you do not require more than two minutes to respond, as your test will timeout and may not be able to be restarted.



WHAT TO EXPECT ON TEST DAY

EXAM IDENTIFICATION AND PSI TEST CENTER REQUIREMENTS

EXAM CONTENT

The MCHES® examination is based on the entry and advanced-level Areas of Responsibilities, Competencies and Sub-competencies delineated by the Health Education Specialist Practice Analysis (HESPA) 2020 **Eight Areas of Responsibility**. The exam is weighted in the following Eight Areas of Responsibility:

Eight Areas of Responsibility of Health Education Specialists	% Questions on MCHES™ Exam
Area I: Assessment of Needs and Capacity	12%
Area II: Planning.....	10%
Area III: Implementation.....	9%
Area IV: Evaluation and Research.....	20%
Area V: Advocacy.....	9%
Area VI: Communication	12%
Area VII: Leadership and Management	18%
Area VIII: Ethics and Professionalism.....	10%

REFERENCE MATERIALS

NCHEC publishes optional study materials to help you prepare for the exam. The materials available for purchase are *The Health Education Specialist: A Companion Guide for Professional Excellence (8th Edition)*. Visit nche.org/publications to order study materials. A suggested list of additional publications is available at nche.org/mches-studying-for-exams.

STUDY GROUPS

You may want to contact the nearest college or university with a health education department or visit our Web site at nche.org/mches-studying-for-exams to determine if there is a MCHES® exam review session offered near you. It is important to remember that the exam is national in scope. You are encouraged to keep your resources broad and use your own text books as well as others. Remember that the study guide should not be your sole source of information.

The NCHEC certification exams are administered in highly secure PSI testing centers. All exam candidates will be required to provide proof of identity with an unexpired original government-issued photo ID with signature, such as a driver’s license, a passport or military ID. The name and photo on the primary ID must exactly match the name on the candidate’s Authorization to Test notice (ATT).

PSI security protocols and a video regarding what to expect on test day can be viewed at

[PSI Test Center Experience](#)

On exam day: Arrive at the test center at least 30 minutes before your scheduled testing time to check in. If you arrive late, you will not be permitted into the testing room, and your exam fees will not be refunded. You must have an acceptable form of identification upon arrival.

Items not permitted in the Testing Room: books, papers, calculators, reference material, food (including beverages), cell phones, electronic and smart devices, smoking or visitors. A dry erase board for making notations during the exam will be provided by PSI staff.

Note: calculators are provided within the computer testing device; candidates may not bring their own calculators. Prior to taking the examination, you will be asked to confirm your agreement that you will not disclose, reproduce, communicate, copy, transmit, or in any way distribute exam items (See Appendix B).

SEAT ASSIGNMENTS

PSI staff will escort you to your testing station. There will be a timer on your screen that will show you the time remaining in your test session. PSI will supply you with noise-reducing headphones or earplugs as available.

TUTORIAL

Before you begin testing, you can walk through a tutorial on how to use the system. This tutorial time is not part of your testing time.

IRREGULARITIES

Irregularities observed or suspected by PSI staff may result in your removal from participation in the test or invalidation of your score. NCHEC reserves the right to investigate each incident of misconduct or irregularity. PSI has outlined guidelines for conduct in their test center on their web site:

<https://test-takers.psiexams.com/nchec>

WEATHER & LOCAL OR NATIONAL EMERGENCIES

If there is severe weather or a local or national emergency near the testing center, check

<https://www.psionline.com/openings> for updates on closures. In the event that PSI cancels an exam due to severe weather or a local or national emergency, you will not be assessed a rescheduling fee.

SECURITY

Candidates will have a total of three (3) hours to complete 165 questions in the CHES®/MCHES® examination, which will include an optional 10 min break midway through the examination. **Both CHES® and MCHES® examinations are offered in three blocks; block 1, which contains questions 1 to question 83, block 2 which contains the optional break and block 3 which contains questions 84 to question 165.**

Before candidates finish the first block (questions 1 to 83), a candidate can go back and check/change any answers in that block. After question 83, a candidate can begin the optional break. Once the third block has begun, a candidate can only access/change answers in the third block (questions 84 to 165).

Candidates will be given an opportunity to take an optional 10-minute break midway through the examination and if a break is taken, will require additional security screening before proceeding to the second block of the exam. **The 10-minute break time is deducted from the total test time. Following the break, CHES® and MCHES® candidates will gain access to the third block of the exam, but will not be able to access the first block of exam questions.**

No part of the exam may be copied or reproduced in part or in whole by any means whatsoever, including memorization. Candidates may not solicit questions or discuss items that were on previous exams with other NCHEC candidates or individuals who hold the MCHES® credential. Candidates are required to sign an affirmation and agreement statement on the application and a confidentiality agreement at the time of taking the exam. Violation of the affirmation and agreement may result in suspension or revocation of the MCHES® credential from those who have received it or suspension and/or denial of eligibility for future exams.

BREAK POLICY

The MCHES® exam allows for one 10-minute optional break during the exam. Please note that **your exam clock will continue to run while you are on break.**

EXAMINATION GRIEVANCE

Any complaints regarding testing conditions or irregularities must be submitted in writing within two weeks after the examination date. We value constructive feedback to help us provide a comfortable exam environment.



EXAMINATION MODALITY

PSI Testing Centers

Live Remote Proctoring via PSI Bridge

Candidates must select **one option** (brick and mortar PSI Test Center OR Live Remote Proctoring).

LIVE REMOTE PROCTORING

LIVE REMOTE PROCTORING OVERVIEW

Live Remote Proctoring through PSI's remote assessment platform, known as PSI Bridge, gives candidates access, allowing them to test from home with an internet-enabled location, where they must provide a computer with a camera, microphone, and an internet connection. It is an easy to use platform, and allows the same standard security procedures as implemented in PSI's global test center network. PSI Bridge is both Windows and MacOS compatible. PSI Bridge includes:

- 100% live-monitoring
- Comprehensive 360 degree environmental readiness checks
- Live security agents
- Proactive protocols (i.e. device checks)

CLICK HERE to review the **Online Proctor User Guide** to learn more about Live Remote Proctoring and the regulations regarding your testing environment. Please refer to the NCHEC website for a list of exam violations.

LRP BREAK POLICY

- Exam allows for **one** 10-minute optional **unscheduled break**.
- Candidate is not permitted to leave camera view without first notifying the Proctor.
- Failure to inform the Proctor prior to taking a break or failure to return on time may result in an inability to complete your exam.
- Upon return, a full security scan will be conducted prior to resuming exam.
- Following the break, CHES® and MCHES® candidates will gain access to the second section of the exam, but will not be able to access the first section of the exam.
- Please note: **exam time will continue to run while on break.**

TECHNOLOGY REQUIREMENTS FOR LRP

Eligible candidates interested in testing using the LRP platform, must first perform a technology and environment check, using PSI Bridge’s utility tool

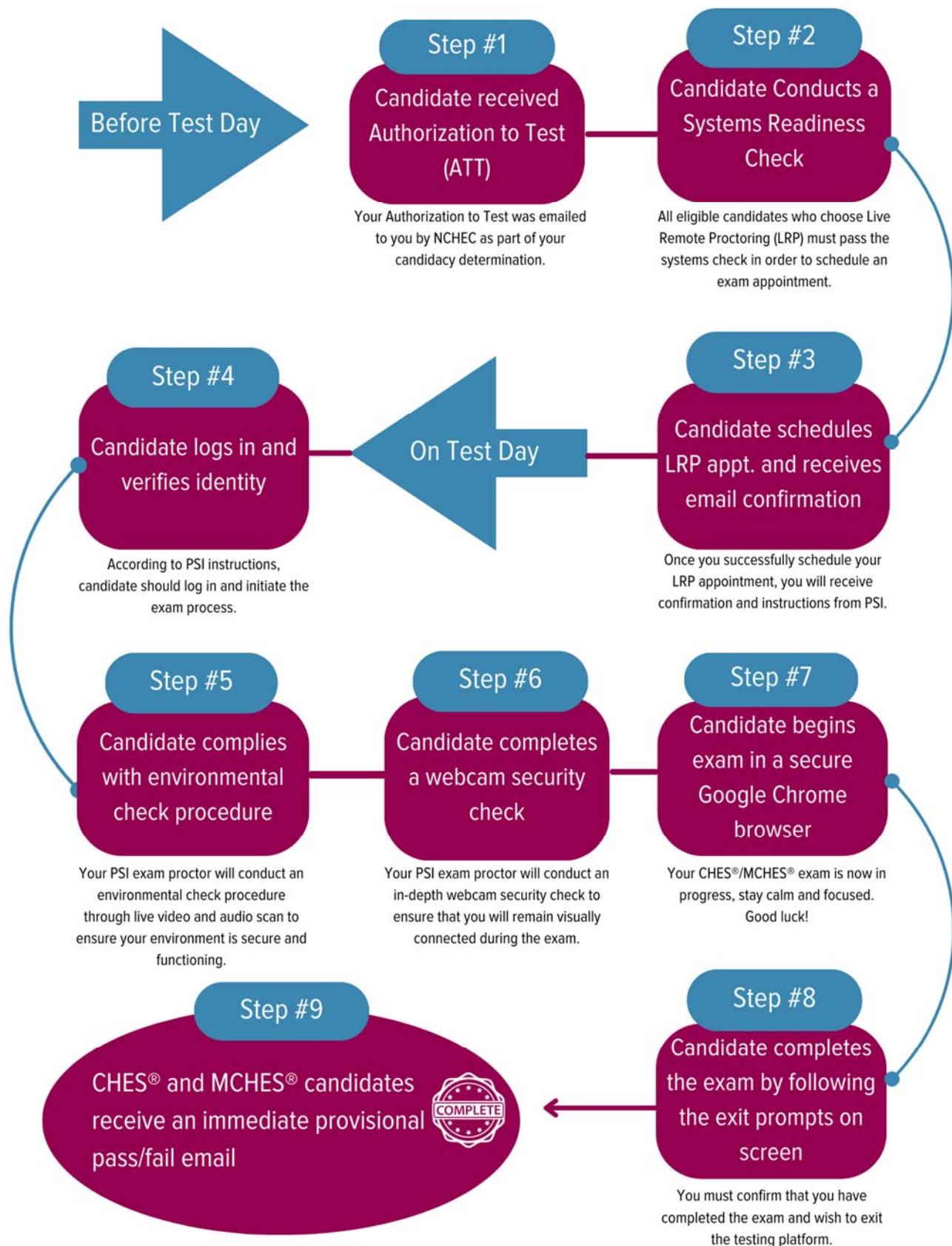
called the Systems Compatibility Check. This tool provides verification that the test taker meets the minimum specifications of:



SYSTEM	REQUIREMENTS
Operating System (64-bit only)	Windows 10, Windows 11 * Not Supported: Windows 10s; Windows 10 in S-Mode, and Windows 11 in S-Mode, or Windows Enterprise (all versions) PSI Bridge is NOT supported on tablets or mobile devices, and Chromebook is not a supported device.
	MacOS 14 (Sonoma), MacOS 12 (Monterey), MacOS 13 (Ventura), MacOS 15 (Sequoia)
	Ubuntu 20.04**, 22.04, 24.04
	<p>Do run a system compatibility check before taking the exam. Online Proctoring Systems Check</p> <p>Do ensure you have administrative permissions on your computer. You can test for admin rights by performing an online test (a link is provided within your confirmation email from PSI ONLY AFTER an exam appointment has been scheduled.)</p> <p>For the best user experience, please use the latest version of the Chrome browser. NCHEC highly recommends using a personal computer (not issued by your employer, school, or organization). Firewalls and security settings from employer-issued and school-issued computers may prevent the PSI software from operating properly.</p>
Screen Resolution	Recommended 1920x1080 or higher
Bandwidth	Minimum 300kbps download and upload speed. Check the connection through Networktest.twilio.com
Microphone	Must be functional and turned on throughout the entirety of the online exam, inclusive of security check, check-in and during the exam. NOTE: Headphones/ear buds should not be used and removal could be requested. Use of either could result in check-in delays and resubmission of check-in.
Camera	Camera must be capable of a 360-degree scan of the test room
	Have an external camera ready if you are using a desktop
	Must be available for testing; functional and turned on throughout the entirety of the online exam, inclusive of security check, check-in and during the exam.

Note: If candidates do not pass the systems compatibility check before scheduling a live remote proctored exam, they must take their exam at a brick and mortar PSI Test Center.

Figure 1. Live Remote Proctoring (LRP) Process for NCHEC-Approved Candidates





EXAM RESULTS

HOW THE MCHES® EXAM IS SCORED

NCHEC has used the Modified Angoff method and variations of this method to set the passing point for the MCHES® examination. The Modified Angoff method is the most widely used criterion-referenced passing point technique within the credentialing industry and is based on the judgment of content experts regarding the expected test performance of candidates who are just qualified. This criterion-referenced procedure sets the performance standard before the examination is taken by candidates. Therefore, this standard is independent of examinee performance. Essentially, this method allows subject-matter experts to establish a consistent level of knowledge that is expected of professionals who are just qualified for certification. There is also no penalty for guessing on an item on the exam. The results are reviewed by NCHEC and a final standard is set. This standard is upheld on every subsequent form of the MCHES® examination using a statistical process called equating. Although all examination forms are based on the same test blueprint and are carefully constructed to have similar difficulty levels, slight differences in difficulty are unavoidable. To ensure that candidates who take an easier or more difficult form of the examination do not have an advantage or disadvantage, equating is used to adjust the passing point for the difficulty level of the form.

RECEIVING YOUR RESULTS

Exam candidates will receive an email notification of provisional results as “pass/did not pass status” after exiting the exam. Provisional results are provided as a convenience to the examinee and examinees’ official scores may differ from their provisional results. Additional evaluation of the functioning of all exam items is done during and at the close of each exam testing window. This additional review is to ensure that all examinees are evaluated accurately and fairly. Candidates will receive an official scaled score report showing each candidate’s overall pass/fail status, as well as diagnostic information about the candidate’s performance in each area of responsibility or domain. A diagnostic level of “proficient,” “moderately proficient,” or “below proficient” will be presented for each Area of Responsibility. **To protect confidentiality results will not be provided by e-mail, phone or fax.**

For more information about NCHEC exams and pass rates, please visit <https://www.ncheec.org/mches-exam-background-and-scoring>

IF YOU DO NOT PASS THE EXAM

If you do not pass the MCHES® exam, you may not choose to retest during the current exam testing window. However, you may retake it in the next consecutive exam testing window, at a reduced rate. This reduced rate is only available to you in the next consecutive exam testing window. If you chose to retest in a cycle beyond the next available exam, you will need to pay the full exam fee and resubmit your application. There is no limit to the amount of times you can take the MCHES® examination. Remediation after multiple unsuccessful attempts is highly encouraged.



AFTER THE MCHES® EXAM

MCHES® CERTIFICATION

By passing the exam, you become a **Master Certified Health Education Specialist (MCHES®)** and earn the honor of using this credential. Each MCHES® will receive a certificate suitable for framing. A wallet-sized identification card is available to print through your online account; a hard copy is available upon request.

ACCEPTABLE USE OF CREDENTIAL

After receiving official notification of passing the MCHES® examination, the designation (MCHES®) may be used only as long as certification remains valid and in good standing. Certified individuals must comply with all re-certification requirements to maintain use of the respective credential and its associated acronym. Certified individuals may not make misleading, deceptive, or confusing statements regarding their certification status. If an individual allows their certification to fall into lapsed/expired status, he or she must immediately discontinue use of the associated acronym and is prohibited from stating or implying certification is current.

MAINTAINING THE CERTIFICATION

The MCHES® certification is valid for a period of five years. All MCHES® must **renew** their credential annually, and **recertify** every fifth year. Renewal requires paying the annual renewal fee. Recertification requires accruing a total of 75 continuing education contact hours (CECH) by the end of the fifth year. At least 45 of these CECH must come from offerings by NCHEC preapproved designated providers (Category I); the remaining 30 CECH may come from other providers (Category II). Of the 75 CECH, 30 of those CECH must be linked to advanced-level Sub-competencies from Category I and/or II for each certification cycle. It is recommended that MCHES® accumulate a minimum of 15 hour each year. A Renewal/Recertification Policies and Procedures booklet is available on our Web site at nchec.org/renewal-and-certification.

Please Note: Continuing education credits earned as a CHES® do not carry over; however if you earned more than 75 credits in your current MCHES® cycle, a maximum of **15** credits are eligible to be carried over as entry-level into the MCHES® certification cycle.

The philosophy behind the policy is that continuing education toward recertification needs to be part of the ongoing commitment to professional development, not something done in the past. This becomes especially important as the Responsibilities, Competencies and Sub-competencies that are the basis of the certification and the continuing education requirement for recertification are updated every 5 years. The 75 credits must be earned within the current 5 year period and also at least 30 of them must be in the advanced level.

DISCIPLINARY POLICY

By applying for certification or recertification, Health Education Specialists recognize the authority of NCHEC to apply the Health Education Code of Ethics (see section below) to those certified. If disciplinary actions are recommended as a result of an ethics investigation, the accused will be given full due process, including an appeal.

A Master Certified Health Education Specialist (MCHES®) certification may be suspended or revoked for reason(s) deemed appropriate by NCHEC including, but not limited to, the following:

1. Falsification of the certification application
2. Falsification of any information requested by NCHEC
3. Misrepresentation of certification status
4. Cheating (or reasonable evidence of intent to cheat) on the examination
5. The conviction or plea of guilty or plea of nolo contendere to a felony in a matter related to the practice of, or qualifications for, professional activity
6. Gross negligence or willful misconduct in the performance of professional services, or other unethical or unprofessional conduct based on demonstrable, verifiable, and serious violations of the Health Education Code of Ethics

HEALTH EDUCATION CODE OF ETHICS

The health education profession is dedicated to excellence in the practice of promoting individual, family, and organizational and community health. The Health Education Code of Ethics provides a basis of the shared values of practicing health education specialists. The responsibility of all MCHES® is to aspire to the highest possible standards of conduct and to encourage the ethical behavior of all those with whom they work.

Please refer to the full Health Education Code of Ethics on nche.org/code-of-ethics for more information on all Articles of Responsibility.

ETHICS VIOLATIONS

1. Complaints regarding possible ethics violations of a CHES®/MCHES® must be submitted in writing to the NCHCEC Executive Director. The complaint must include the accuser's name and contact information. Individuals bringing complaints are not entitled to any relief or damages by virtue of this process, although they will receive notice of the actions taken.
2. Complaints will undergo an administrative review of documentation by the Disciplinary Committee of the NCHCEC Board of Commissioners within 30 days of receipt by NCHCEC to determine if the alleged action falls within the scope of disciplinary policy and warrants investigation.
3. The accused will be notified in writing of complaint within 14 days after the administrative review. Further, in the absence of unusual circumstances, the accused will receive the original complaint and documentation including the name of the accuser.
4. The accused will be given an opportunity to formally and in writing admit to or refute the accusation in 30 days from letter date, thus ensuring due process in the review.
5. The investigation may require procuring additional materials and interviews with relevant people.
6. If it is determined that there was a bona fide violation of ethics, the consequences can range from a letter of reprimand with warning, requiring the accused to complete an educational intervention on ethics, suspension, or revocation of the certification. Complainant and the certificant will be notified of the final decision of the Disciplinary Committee.
7. Every effort will be made to reach a decision in a timely manner; however, extended time may be needed to ensure full due process.
8. Actions taken do not constitute enforcement of the law, although referral to appropriate federal, state, or local government agencies may be made about the conduct of the certificant in appropriate situations.
9. NCHCEC will publish suspensions and revocations on the website.

Effective Date: April 2018



PLEASE PRINT CLEARLY WITH INK OR TYPE ALL INFORMATION. INCOMPLETE OR MISSING INFORMATION WILL DELAY PROCESSING OF THE APPLICATION. ADDRESS OR NAME CHANGES THAT OCCUR AFTER SUBMISSION OF THIS APPLICATION MUST BE REPORTED TO NCHEC. (Print your name **EXACTLY** as it should appear on your **MCHES® Certificate**).

CHES® ID# _____

APPLICANT

Name _____
Salutation First/Given MI Last Suffix

Female Male Prefer Not to Answer Other _____

Previous Last Name (if applicable) _____ Social Security # _____ Date of Birth _____

Are you currently employed in the Health Education profession?: (If yes, please answer next line) Yes _____ NO _____

Job title _____ Employer: _____

Is this certification required for your job?: Yes _____ No _____

Address _____
Number & Street Apartment #

Home Phone (_____) _____ *City/Town State* Work Phone (_____) _____ *Country ZIP/Postal Code*

Fax Phone (_____) _____ Cell Phone (_____) _____

Email Address _____

Have you applied previously for the MCHES® examination? YES NO

Please check if retaking exam: Previously failed Recertification Other _____

Testing Accommodations:

Applicants requesting testing arrangements must submit a Testing Accommodation Request Form AND a letter signed by a medical professional stating an accommodation is required. This will be completed once your application has been approved and you will receive a link within your Authorization email.

PAYMENT

Application Fees and Deadlines (Please select):

Note: The application fee **INCLUDES** a \$100 non-refundable processing fee.

April 23-May 3, 2025 Exam	CHES®
EARLY Nov 1 - Nov 31	\$295 <input type="checkbox"/>
REGULAR Dec 1 - Jan 31	\$355 <input type="checkbox"/>
LATE Feb 1 - Feb 28	\$415 <input type="checkbox"/>

Amount: _____

Indicate payment method (Make checks payable to NCHEC) : (There will be a \$25 fee for all returned checks)

Company Check _____ Personal Check _____ Money Order _____ Purchase Order _____ (attach PO to application - complete billing information section below) **(Payment MUST be received by final deadline)**

Credit Card Type: Visa MasterCard American Express Discover
Card No: _____ Exp. Date _____ CV: _____

Billing Information:

Name on Card: _____ Address _____
City, State, Zip: _____

Signature: _____ Phone: - _____

PERMISSION TO PUBLISH

In recognition of my achievement as a Master Certified Health Education Specialist, NCHEC may publish my name in the NCHEC News and on its website. As a benefit of certification, my name and/or address may be available as follows:

- a. to continuing education providers in order to receive notice of professional development opportunities*
- b. to employers for recruitment purposes or to verify one's status as an active MCHES®*
- c. to researchers for study purposes*
- d. to universities for the purpose of acknowledging or monitoring achievements of program graduates*
- e. to professional associations for the purpose of mailing newsletters/announcements, or for recruiting new members*

NCHEC has permission to distribute my name and contact information as listed above: YES NO (YOU MUST CHECK ONE)

NCHEC has permission to distribute my name and contact information with providers of study groups and exam preparation courses: YES NO (YOU MUST CHECK ONE)

The above questions are required field(s) and must be completed

AFFIRMATION and AGREEMENT

Required Signature

I affirm that the information given in this application is true and accurate. I hereby give my permission to NCHEC to verify any information in support of my application. I understand that the MCHES® examination and the test questions contained therein are the exclusive property of NCHEC. No part of this examination may be copied or reproduced in part or in whole, by any means whatsoever, including memorization. I understand that NCHEC will provide aggregate scores to institutions and publications for reporting purposes and that individual identification will not be used. I agree to abide by NCHEC's Exam Polices as outlined in the MCHES® Examination Handbook. If successful in passing the exam, I agree to abide by NCHEC's Policies and Procedures for Renewal and Recertification and abide by the Health Education Code of Ethics. Violations of NCHEC's Exam Application or Renewal and Recertification policies and the Health Education Code of Ethics, or falsification of any documentation, may result in suspension or revocation of credential or denial of eligibility for future exams. I affirm that I have been certified for five years and currently hold an active CHES® credential (or extension status with 75+ CECH).

Signature _____

Date _____

DEMOGRAPHIC INFORMATION

The sharing of your demographic information will help to inform organizational decisions regarding the advancement of the profession of health education and promotion. Information such as credentials, practice setting, age, gender and ethnicity will allow NCHEC to communicate effectively about the makeup of its certified body with government agencies, as well as our own leadership, to better represent your needs within our organization as well as the profession. To accomplish this, we need more complete aggregate baseline data. **Please be advised that the information you provide below is solely for NCHEC official use, and your personal/individual data will not be shared with anyone.**

Referral Source - How have you learned about NCHEC/MCHES®?

- Direct Mail Colleague University Conference/Exhibit Employer Website Visit Journal Ad Prefer not to answer

Work Settings:

- Healthcare School University Retired Community Workplace Other Prefer not to answer

Other Credentials:

- ACSW ATC CDE CPH CPP CPS CRTT CSWHC DO LPN LSW MD QCSW RCEP RD RN RRT OTHER _____ Prefer not to answer

Prefer not to answer

Are you of Hispanic, Latino or Spanish origin?

- No, not of Hispanic, Latino or Spanish origin
- Yes, Mexican, Mexican Am., Chicano
- Yes, Puerto Rican Yes, Cuban Yes, another Hispanic, Latino, or Spanish origin - *Print origin, for example, Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard and so on*

Race:

- Prefer not to answer
- White Black, African American
- American Indian Alaska Native
- Asian Indian Japanese Native Hawaiian
- Chinese Korean Guamanian or Chamorro
- Filipino Vietnamese Samoan
- Other Asian - *Print race, for example Hmong, Laotian, Thai, Pakistani, Cambodian and so on* _____
- Other Pacific Islander - *Print race, for example Fijian, Tongan, and so on* _____
- Some other race _____



MCHES® – April 23-May 3, 2025
MASTER CERTIFIED HEALTH EDUCATION SPECIALIST

Exam Application (CHES® Less than 5years and non-CHES®)

PLEASE PRINT CLEARLY WITH **INK** OR TYPE ALL INFORMATION. INCOMPLETE OR MISSING INFORMATION WILL DELAY PROCESSING OF THE APPLICATION. ADDRESS OR NAME CHANGES THAT OCCUR AFTER SUBMISSION OF THIS APPLICATION MUST BE REPORTED TO NCHEC. (Print your name **EXACTLY** as it should appear on your **MCHES® Certificate**).

CHES® ID# _____ (if applicable)

APPLICANT

Name _____
Salutation First/Given MI Last Suffix

Female Male Prefer Not to Answer Other _____

Previous Last Name (if applicable) _____ Social Security # _____ Date of Birth _____

Are you currently employed in the Health Education profession?: (If **yes**, please answer next line) Yes _____ NO _____

Job title _____ Employer: _____

Is this certification required for your job?: Yes _____ No _____

Address _____
Number & Street Apartment #

Home Phone (_____) _____ *City/Town State Country ZIP/Postal Code*
 Work Phone (_____) _____

Fax Phone (_____) _____ Cell Phone (_____) _____

Email Address _____

Please verify that you have been a health education specialist practicing for at least 5 years: YES NO

Have you previously been a CHES®? YES NO If yes, CHES® ID # _____

ACADEMIC BACKGROUND

Please indicate the primary degree being used for eligibility and submit supporting transcripts for approval. Other degree(s) listed on application do not require a transcript, **unless they are being used to determine eligibility**.

Primary Degree Year (Grad Date)	Primary Degree Awarded	Primary Major Name	Primary University/College Name

Other Degrees Received:

Degree Year	Degree Awarded	Major Name	University/College Name

Does NCHEC have your GRADUATE transcript(s) on file? YES NO (If no, please provide NCHEC with graduate transcripts)

Exam applications, university transcripts, and any supporting documentation become the property of NCHEC. These items will not be returned to the exam applicant or forwarded to a third party.

Name _____

Verifiers

Please list the names of the two people you have asked to complete the **Verification Forms**. For additional information, see the MCHES® Examination Instructions.

1.	_____	_____
	<i>Full name</i>	<i>Job title</i>
2.	_____	_____
	<i>Full name</i>	<i>Job title</i>

Check if Testing Accommodations are required: _____

Applicants requesting testing arrangements must submit a Testing Accommodation Request Form AND a letter signed by a medical professional stating an accommodation is required. Applications will not be approved until all accommodation documentation have been received and approved.

*****UPON REVIEW OF YOUR TRANSCRIPTS, RESUME/CV AND VERIFICATION FORMS, YOU WILL BE NOTIFIED OF ELIGIBILITY THROUGH EMAIL**

PAYMENT

Application Fees and Deadlines (Please select):

Note: The application fee **INCLUDES** a \$100 non-refundable processing fee.

Amount: _____

Indicate payment method (Make checks payable to NCHC) : There will be a \$25 fee for all returned checks

April 23-May 3, 2025 Exam	CHES®	non-CHES®
<i>U.S. Post Marked On or Before</i>		
EARLY Nov 1 - Nov 31	\$295 <input type="checkbox"/>	\$345 <input type="checkbox"/>
REGULAR Dec 1 - Jan 31	\$355 <input type="checkbox"/>	\$405 <input type="checkbox"/>
LATE Feb 1 - Feb 28	\$415 <input type="checkbox"/>	\$465 <input type="checkbox"/>

Company Check _____ Personal Check _____ Money Order _____ Purchase Order _____ (attach PO to application - complete billing information section below) **(Payment MUST be received by final deadline)**

Credit Card Type: Visa MasterCard American Express Discover
Card No: _____ Exp. Date _____ CV: _____

Billing Information:

Name on Card: _____

Address: _____

City, State, Zip: _____

Signature: _____ Phone: _____

PERMISSION TO PUBLISH

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- to continuing education providers in order to receive notice of professional development opportunities
- to employers for recruitment purposes or to verify one's status as an active MCHES®
- to researchers for study purposes
- to universities for the purpose of acknowledging or monitoring achievements of program graduates
- to professional associations for the purpose of mailing newsletters/announcements, or for recruiting new members

*NCHEC has permission to distribute my name and contact information as listed above: YES NO (YOU MUST CHECK ONE)

*NCHEC has permission to distribute my name and contact information with providers of study groups and exam preparation courses: YES NO (YOU MUST CHECK ONE)

*NCHEC has permission to contact me by text with exam updates and information: YES NO (YOU MUST CHECK ONE)

The above questions are required field(s) and must be completed

AFFIRMATION and AGREEMENT

Required Signature

I affirm that the information given in this application is true and accurate. I hereby give my permission to NCHEC to verify any information in support of my application which includes contacting the Verifiers. I understand that the MCHES® examination and the test questions contained therein are the exclusive property of NCHEC. No part of this examination may be copied or reproduced in part or in whole, by any means whatsoever, including memorization. I understand that NCHEC will provide aggregate scores to institutions and publications for reporting purposes and that individual identification will not be used. I agree to abide by NCHEC's Exam Policies as outlined in the MCHES® Exam Handbook. If successful in passing the exam, I agree to NCHEC's Policies and Procedures for Renewal and Recertification and abide by the Health Education Code of Ethics. Violations of NCHEC's Exam Application or Renewal and Recertification policies and the Health Education Code of Ethics, or falsification of any documentation, may result in suspension or revocation of credential or denial of eligibility for future exams.

Signature _____ Date _____
mm/dd/yyyy

Demographic Information

The sharing of your demographic information will help to inform organizational decisions regarding the advancement of the profession of health education and promotion. Information such as credentials, practice setting, age, gender and ethnicity will allow NCHEC to communicate effectively about the makeup of its certified body with government agencies, as well as our own leadership, to better represent your needs within our organization as well as the profession. To accomplish this, we need more complete aggregate baseline data. **Please be advised that the information you provide below is solely for NCHEC official use, and your personal/individual data will not be shared with anyone.**

Referral Source - How have you learned about NCHEC/MCHES®?

- Direct Mail Colleague University
 Conference/Exhibit Employer Website Visit
 Journal Ad Prefer not to answer

Work Settings:

- Healthcare School University Retired
 Community Workplace Other
 Prefer not to answer

Other Credentials:

- ACSW ATC CDE CPH CPP CPS
 CRTT CSWHC DO LPN LSW MD
 QCSW RCEP RD RN RRT
 OTHER _____
 Prefer not to answer

Prefer not to answer

Are you of Hispanic, Latino or Spanish origin?

- No, not of Hispanic, Latino or Spanish origin
 Yes, Mexican, Mexican Am., Chicano
 Yes, Puerto Rican Yes, Cuban Yes, another Hispanic, Latino, or Spanish origin - *Print origin, for example, Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard and so on*

Race:

- Prefer not to answer
 White Black, African American
 American Indian Alaska Native
 Chinese Korean Guamanian or Chamorro
 Filipino Vietnamese Samoan
 Other Asian - *Print race, for example Hmong, Laotian, Thai, Pakistani, Cambodian and so on* _____
 Other Pacific Islander - *Print race, for example Fijian, Tongan, and so on* _____
 Some other race _____



APPENDIX B: CHES® AND MCHES®

Confidentiality/Non-Disclosure SAMPLE Agreement

*It is not necessary to submit this form when applying.

The box below contains the confidentiality/non-disclosure agreement that you will be asked to agree to as a condition of sitting for the CHES® or MCHES® exam. If you do not accept the confidentiality agreement, your exam will terminate and your exam will not be able to be reset. No refunds will be provided to examinees who choose not to accept the confidentiality agreement at the time of their examination. Please take the time to review the agreement prior to going to your PSI test center, as you will have limited time to review the agreement during the exam period.

In a few moments, you will begin your examination. Please note that this examination and all portions thereof constitute proprietary, confidential information owned exclusively by the National Commission for Health Education Credentialing Inc. All exam content is also protected by U.S. and international copyright and other laws, and all rights are reserved. The exam must not be copied or distributed in part or in its entirety. You may select either “Yes I agree” or “No, I do not agree” and thereby terminate your exam

- Yes, I agree** not to copy, disclose, or discuss any part of the specific or general nature of the CHES®/MCHES® exam scenarios or questions; and I understand that, should I pass this exam, my violation of this agreement is a basis for the revocation of my certification, and if I do not pass this exam, violation could result in denial of eligibility to retake the examination.
- Or I do not agree**, and thereby terminate my exam.



Credentialing Excellence in Health Education

NCHEC

**National Commission
for Health Education Credentialing**