



Examinees with Disabilities Guide

ASSOCIATION FOR MATERIALS PROTECTION AND PERFORMANCE

July 2026

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SPECIAL EXAM ACCOMODATIONS

AMPP provides reasonable and appropriate accommodations for individuals with documented disabilities within the meaning of the Americans with Disabilities Act, as amended (ADA). If you believe that you have a disability that prevents you from taking an exam under standard conditions, you may request accommodation.

Under ADA, a disability is a physical or mental impairment that substantially limits an individual's ability to perform one or more major life activities, as compared with most people in the general population.

Please note, not having the ability to read or write in the same language as the examination is **not** considered a disability.

To request special testing accommodation, you must provide documentation from your doctor that includes your diagnosis and is dated within the last three years from date of request.

After logging into your **My Certification Portal**, select Schedule/Manage exams, once the exam is populated, click **Resume Exam Request**. You will be asked if you are requesting special accommodation. Select "**Yes**" and complete the required questions. You will also have a place to upload your doctor's note containing the reason you are requesting accommodation.

Once you have submitted the request, AMPP will review your documentation. You will receive an email from the Pearson team with the outcome of your request.

- If your accommodation request is **approved**, the email will include a phone number for you to call to schedule your exam.
- If your accommodation request is **not approved**, you will also receive an email notifying you of that decision.

The AMPP Examinees with Disabilities Guide, which provides instructions on how to submit supporting documentation, can be found at www.ampp.org. Indicate your need for accommodation prior to the exam registration process. You will receive email confirmation from AMPP to acknowledge the request for accommodation.

The review/approval process can take up to 30 days and will not begin until AMPP has received all required documentation. You will not be authorized to schedule an appointment for testing until this process has been completed.

Support staff does not maintain requests for accommodation beyond an event for which an accommodation is requested, and thus an examination candidate must submit a request for each event for which they seek accommodation.

COMPUTER BASED EXAMS

Examinees can reference the following sites for information about accommodations:

- General Information:

<http://home.pearsonvue.com/test-taker/Test-accommodations.aspx>

Email questions related to the accommodations process to AMPP
customersupport@ampp.org .

For in-person and hands-on practical exam accommodations, use the form provided below. Accommodation requests received less than 30 days prior to the practical exam are not guaranteed. It is the responsibility of the examinee to request accommodation at least 30 days in advance of any practical exam.

PEARSON VUE APPROVED COMFORT AID LIST

*** Please note: This list is directly from the Pearson VUE website. Pearson VUE holds the right to change this list at any time, without notice. AMPP is not responsible for an outdated list. For the most up to date list, refer to the Pearson VUE website.*

The following items are comfort aids and do **not** require pre-approval. They will be allowed in the testing room upon visual inspection by the Test Center staff. Visual inspection will be done by examining the item without directly touching it (or the candidate) and without asking the candidate to remove the item, unless otherwise stated below.

Medicine & Medical Devices
Auto-injectors, such as EpiPen
Bandages
Braces- Neck, Back, Wrist, Leg or Ankle Braces
Casts - including slings for broken/sprained arms and other injury-related items that cannot be removed.
Cough Drops - must be unwrapped and not in a bottle/container.
Eye Drops
Eye Patches
Eyeglasses (without the case), including tinted lenses – must be removed for visual inspection
Glucose Tablets (does not include hard candy) - must be unwrapped and not in a bottle/container.
Handheld (non-electronic) magnifying glass (without the case)
Hearing aids/Cochlear implant

Medicine & Medical Devices
Inhaler
Medical Alert Bracelet
Medical device: Must be attached to a person's body, must be inaudible, and must not include a remote-control device. Examples include but are not limited to: -Insulin pump -Continuous glucose monitor -Note: If the insulin pump or continuous glucose monitor includes an accompanying remote-control device, the remote-control device may not be taken into the testing room. If there is a need to take the remote-control device into the testing room, Candidates must apply and be approved for an accommodation to do so. -TENS Unit -Spinal Cord Stimulator
Medical/Surgical face mask
Nasal drops/spray
Oxygen Tank
Pillow/Cushion
Pills - i.e. Tylenol or aspirin must be unwrapped and not in a bottle/container. Candidates may bring pills that are still in the packaging if the packaging states they MUST remain in the packaging, such as nitro glycerin pills that cannot be exposed to air. Packaging must be properly inspected.
Mobility Devices:
Canes
Crutches

Medicine & Medical Devices
Motorized Scooters/Chairs
Walkers
Wheelchairs
Other approved items (must be provided by Testing Center):
Tissues/Kleenex
Earplugs and Noise Reducing Headphones (only considered a comfort aid in Pearson Professional Centers, for other testing channels an accommodation approval will be required)

NON-Computer Based Exams (CBT)

(Including paper - and - pencil, practical, essay, and oral exams)

SPECIAL ACCOMMODATION REQUEST FORM

The form begins on the following page and is available to either print or complete electronically. Once completed, send to certification_support@ampp.org.

A few items to note:

- A medical physician's note is required to be submitted with the completed form (dated no more than 3 years from the exam date).
- The review/approval process can take up to 30 days and will not begin until NII has received all required documentation, including the medical note. You will not be authorized to schedule the exam until this process has been completed.
- Support staff does not maintain requests for accommodation beyond an event for which an accommodation is requested, and thus an examination candidate must submit a request for each event for which they seek accommodation.



15835 Park Ten Blvd. Houston, TX 77084-
4906 Telephone: 281-228-6223 www.ampp.org

This request is for special accommodation during a (select all that apply):

_____ Computer Based Exam

_____ Paper and Pencil Exam

_____ Practical Exam

_____ Essay Exam

_____ Oral Exam

Support staff does not maintain requests for accommodation beyond an event for which an accommodation is requested, and thus an examination candidate must submit a request for each event for which they seek accommodation.

EXAM CANDIDATE REQUEST FOR TEST ACCOMMODATIONS

I. COURSE INFORMATION (if applicable)

Course location (city and state): _____

Course code (ex: 42414001) and dates: _ _ _ _ _

II. CANDIDATE INFORMATION

AMPP Contact/Member ID (if known): _____

Candidate's Full Name: _____
First Middle Last Suffix

Address: _____
_____.Street
Number/Street Name

City, State, Postal Code

Country: _____

III. ADA/SPECIAL ACCOMMODATION HISTORY

Have you previously requested ADA accommodation through AMPP?

Yes/No

If yes, were your accommodations granted?

Yes/No

If yes, please list all test dates:

IV. DISABILITY INFORMATION*

Please describe the nature of your disability or disabilities:

Month and year when each disability was first diagnosed:

*(*please attach or include medical verification documentation with the application)*

Describe your current functional limitations and how those limitations will affect your ability to take the AMPP exam.

Describe all treatment, medication, devices, auxiliary aids, or strategies you ordinarily use to ameliorate the function impact of your disability or disabilities and the effectiveness thereof, or list "none".

V. SPECIFIC ACCOMMODATION REQUEST

What specific accommodation(s) are you requesting?

Will these accommodation(s) be needed for all portions of the exam (i.e. written, practical, or lab where applicable)?

VI. **ATTESTATION**

The information I have provided in support of my request for test accommodation(s) is true and complete. I understand that if AMPP determines that I, or a third party on my behalf, submitted as part of this request any information or documentation that is false, inaccurate, or intentionally misleading, the AMPP reserves the right to revoke any Certification that is associated with this accommodation request.

I understand that the completed application and doctor verification paperwork (dated no more than 3 years from the course start date or exam date, in the case of a stand-alone exam) verifying my disability/disabilities must be received by AMPP International Institute no less than 60 days prior to the course start date to allow for proper verification/accommodation preparedness.

Candidate Signature: _____

Date Signed: _____

VII. **RESOLUTION OF REASONABLE ACCOMMODATION REQUEST**

Your request has been: _____ Granted in Full
_____ Granted Partially*

*Explanation of partial approval:

Your request has been: _____ Denied in Full
_____ Denied Partially*

*Explanation of partial denial:

Your request has been denied for the following reasons:
