

McCrone Research Institute
A NOT-FOR-PROFIT CORPORATION
2820 S. Michigan Ave., Chicago, IL, 60616
phone: 312-842-7100, email: registrar@mcri.org
fax: 312-842-1078, web: www.mcri.org



Application for Certification in Applied Chemical Microscopy

Name: _____ Title: _____

Address: _____ City _____ State: _____ Zip _____

Company Phone: _____ Company Fax: _____ E-mail: _____

Certification involves successful completion of the following:

- I. Fulfilling the course requirements (see below).
- II. Passing a comprehensive written examination (this exam can be taken in Chicago at McRI at any time, or at other pre-arranged locations with an McRI employee present, i.e. professional meetings).
- III. Thorough microscopical characterization and documentation of an unknown sample as a proficiency test.

A detailed description of the certification process and requirements may be found on our website at www.mcri.org.

Course Requirements (indicate date taken or estimate when you propose to take the course):

Primary Course: _____ Date: _____

Secondary Course: _____ Date: _____

Methods Course: _____ Date: _____

Sample Preparation or Collateral Methods
Course: _____ Date: _____

Advanced Course: _____ Date: _____

Elective Course: _____ Date: _____

_ Payment enclosed \$ _____ Purchase Order # _____

Charge payment: _ Visa _ MasterCard _ AmEx Card # _____ Expires _____

Cardholder's Name _____ Signature _____

There is a \$200 fee for taking the written examination, and a \$200 fee for the proficiency test.
Mail full payment (\$400) along with the completed application form to:

*McCrone Research Institute, 2820 S. Michigan Avenue, Chicago, IL 60616-3292
PHONE: 312/842-7100, FAX: 312/842-1078*

Signature: _____ Date: _____