Cancellation Request FPACTM Examination



Submit your cancellation request to AFP via fax at +1.301.907.2864 or by email to FPACert@AFPonline.org.

- You must contact Pearson VUE at least 24 hours (one full business day) prior to your scheduled appointment to cancel your exam appointment(s). For Pearson VUE contact information, please visit www.pearsonvue.com/afp. Failure to cancel a scheduled appointment(s) will result in a \$110 no show penalty fee per exam part.
- Exam candidates who submit a cancellation request form by the deadline will be refunded the exam fee only. The application fee is non-refundable and non-transferable. For candidates whose most recent payment did not include an application fee, there will be a \$100 processing fee withheld and any no-show penalty fees (\$110) that were previously assessed.
- Cancellation requests will not be accepted after the cancellation deadline. No exceptions.

FPAC Examination Window	Cancellation De	eadline	
August 1 - September 30, 2025 (2025B)	July 18, 2025		
Please print or type			
1. AFP ID #:	AFP MEMBER?	YES 🔲 NO	
2. NAME: . MR MS MRS DR	AMILY	FIRST	MI
3. TITLE:			
4. ORGANIZATION:			
5. MAILING ADDRESS PREFERENCE (D HOME	BUSINESS)		
6. BUSINESS ADDRESS:			
CITY:	STATE/PROV:	POSTAL CODE:	COUNTRY:
HOME ADDRESS:			
CITY:	STATE/PROV:	POSTAL CODE:	COUNTRY:
7. PHONE:			
E-MAIL:			
By signing and submitting this cancellation request (www.FPACert.org/rules). I understand that I am su test scores and the complete certification process a	bject to all policies concerning nd policies including the FPAC	cancellations, refunds, deferrals, recertification process.	administration of the test, reporting of
SIGNATURE:			DATE:

ALL CANCELLATION REQUESTS MUST BE SIGNED BY CANDIDATE. THIRD-PARTY REQUESTS WILL NOT BE ACCEPTED. Please direct all inquiries to the certification department at +1.301.907.2862 or by email to FPACert@AFPonline.org.