



**National Board for Certified Counselors (NBCC)  
Center for Credentialing & Education (CCE)**

**Statement of Declination for ADA/SEA Accommodations**

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Printed Name: \_\_\_\_\_

NBCC ID: \_\_\_\_\_

This document acknowledges your decision to **decline** the special examination accommodations that NBCC or CCE approved for you on \_\_\_\_\_ for the \_\_\_\_\_.

*Date* *Examination*

By signing this document, you affirm that you decided to decline your ADA special examination accommodations of your own volition, and NBCC or CCE did not in any way attempt to influence your choice.

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*(Original ink signature required)* *mm/dd/yyyy*