

ASE CERTIFICATION REIMBURSEMENT CLAIM FORM



1.) Attach Documentation:

Photocopy of ASE test score registration *and* Photocopy of ASE test score report

2.) Mail Completed Form and Attachments to:

ASE Certified Reimbursement
340 Poplar View Lane East, Suite 1, Collierville, TN 38017
OR email completed form to
info@professionalschoice.com



www.ase.com/tests

Reimbursement Claim:

Gold Level Members - Number of Tests Successfully Completed: x \$35.00 = \$ Total Claim

Platinum Level Members - Number of Tests Successfully Completed: x \$50.00 = \$ Total Claim

Check Should Be Made Payable To: Technician Service Center

Service Center Information:

Shop Name:

Shop Address:

City, State, Zip:

Shop Phone Number:

Technician Name:

Shop Owner/Manager Name:

Signature: Date: