Certification Test Reimbursement Program



Our Commitment To Your Training

Congratulations!

...from the affiliated Pronto warehouse distributors, parts stores and service centers on your having successfully received ASE certification or recertification as the result of recent test activity.

We're pleased to recognize your accomplishment by means of this reimbursement program.

Program Details:

Upon successfully achieving ASE certification or recertification, we will provide reimbursement per the testing levels on reverse side claim form.

100% of the required information specified on the reverse side Claim Form must be provided.

Please allow 4 - 6 weeks for processing.

To remain certified, those with ASE credentials must be retested every 5 years.

Pronto is proud to support ASE certification for auto professionals!





NAME(S) OF ASE TEST(S) SUCCESSFULLY COMPLETED:			
(i.e. Brakes, Heating & Air Conditioning, Painting & I	Refinishing, Automobile Part	s Specialist, etc.)	
DATE AND PLACE (CITY NAME) TEST WAS	TAKEN:		
REIMBURSEMENT AMOUNT CLAIMED:			
_	sts successfully completed:		
Number of Advanced Level Tests (L1		x \$100.00 = \$	Total Claim
The \$34 registration fee does no			
Number of Recertification Regular Te	• •		
Number of Recertification Advanced Level Tests (L			Iotal Claim [*]
* There is a maximum reimbursement of \$15 The \$34 registration fee does no	-	erincation tests.	
Section 609 Refrigerant Recove	ry & Recycling Certification:	x \$20.00 = \$_	Total Claim*
* There is a maximum reimbursement of \$20	oper Technician for the Sect	tion 609 test.	
ASE Renewal A	pp Annual Subscription fee:	at \$48.00 = \$	Total Claim
Reimbursement Check should be made	payable to: Tech	nician Serv	ice Center
PERSONAL DATA:			
Technician Name:	Tech	ASE ID #:	_
Home Address:Street	Cit	y State	Zip Code
# Years Full Time Work Experience:			
# Different ASE Certifications Now Held	:	ASE M	aster Technician
Employed By:		· 	
Business Address:Street	Cit	y State	Zip Code
MEMBER VERIFICATION:			
Employer Signature:			
Warehouse Distributor Signature:			
NOTE: Must attach claim documentation:			
1. Photocopy of ASE test registration sign-up form, or admission ticket, and			
2. Photocopy of ASE score report			
EMAIL, MAIL OR FAX COMPLETED CLAIM	FORM TO:		
Email: reimbursement@theprontonetwork.com			
Mail: ASE Certification Reimbursement 2601 Heritage Avenue Grapevine, TX 76051			
Fax: 817-430-9559	Please allow 4-6 weeks for	processing.	

- Claims for reimbursement of fees related to unsuccessful test activity will not be honored.
- Claims must be submitted within 6 months of receiving test results.
- Individual ASE test registration cost will not be reimbursed.
- Pre-test study aids, test preparation courses, work shops, travel expenses, etc. will not be reimbursed.