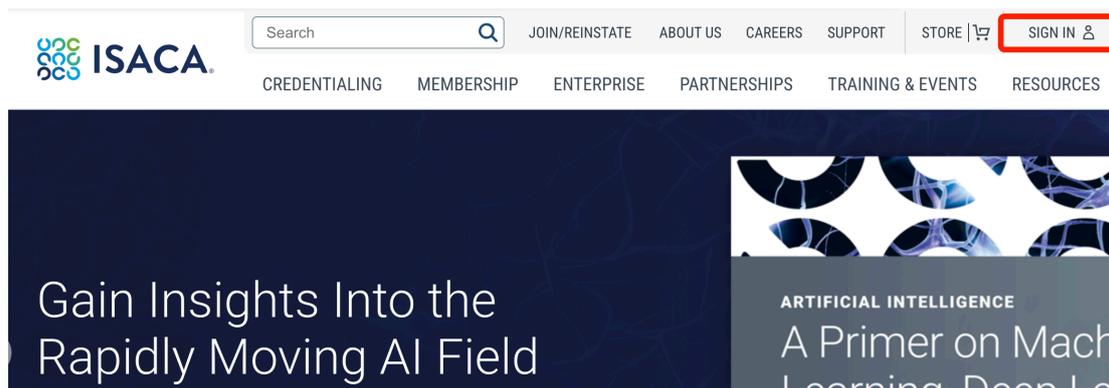


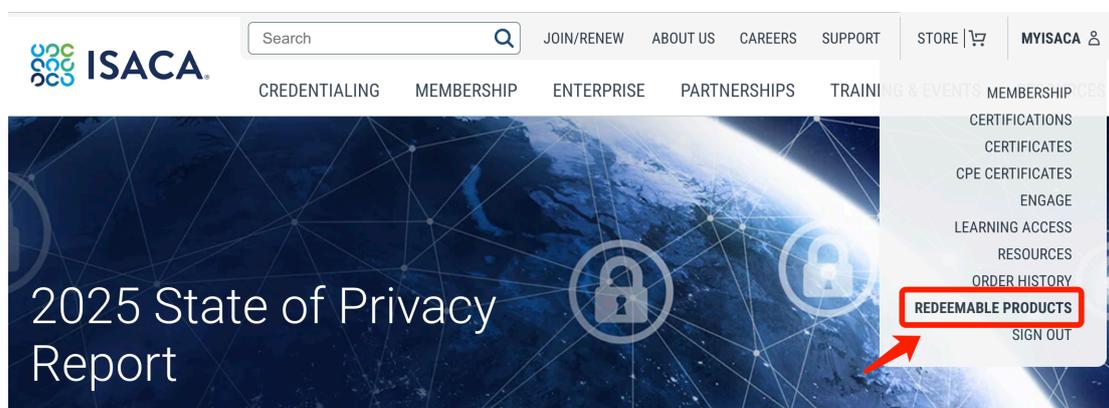
## 报考指南

在执行下面的操作之前，请确认您已经从 **ISACA** 中国官方授权机构 (<https://www.isaca.org.cn/enterprise/atos>) 获取 **ISACA** 的考试资格。

点击前往 **ISACA** 全球官网 [www.isaca.org](http://www.isaca.org) 并登录您的账号。



登录之后，在右上方找到“**MYISACA**”，显示下拉菜单之后，点击“**REDEEMABLE PRODUCTS**”，开始兑换您的考试资格。



出现下图界面之后，请先核对您报名的考试名称是否正确，若无误，请点击“**Redeem**”进入信息填报界面。

# Redeemable Products

进入信息填报界面，请用英文填写所有带红色“\*”标识的信息，并按照英文格式拼写。姓名必须是您中文证件名字的拼音，与身份证姓名一致，请注意名字在前，姓氏在后，并注意首字母大写（若“Government Issued ID”处的填写的信息与实际身份证件不符，有可能会在考场被拒绝参加考试）。

Prefix  
--None--

First/Given Name \*

Family Name/Surname \*

Government Issued ID Name

The name you enter in the Government Issued ID Name fields should match your government-issued identification and will be used as verification when taking ISACA exams. Once populated these fields are not editable on this form and you must contact the [Customer Experience Center](#) to make any future updates. If the name you enter does not match the ID you present at the time of your exam, you will not be allowed to take the exam.

Suffix  
--None--

Government Issued ID First/Given Name \* ← 身份证名字 (例如全名为“王小明”，此处应填写“Xiaoming”)

Government Issued ID Middle Name

Government Issued ID Family Name/Surname \* ← 身份证姓氏 (例如全名为“王小明”，此处应填写“Wang”)

填写您的联系方式，请正确填写个人常用邮箱及联系电话，否则可能导致后续证书发放时无法与您取得联系。

Email \*

Mobile/Other Phone

1. 请填写个人常用邮箱

2. 为了方便地为您提供支持, 请填写个人常用手机号

**Contact Information**

**Professional Information**

Organization \*

Level of Education \*

Job Title \*

请按照要求填写您的公司信息。

**Professional Information**

Organization \*

Level of Education \*

Job Title \*

Industry \*

Current Professional Activity \*

Primary Job Responsibility \*

Years Experience \*

Size of IT Security Staff \*

Size of IT Staff \*

Organization Size \*

请按照要求填写您的公司信息

注意, 请务必在“Preferred Certificate Name”处正确填写您的名字, 该名字将体现在证书上, 建议按照英文格式填写您的中文姓名拼音(名字在前, 姓氏在后), 不可以填写中文, 否则证书姓名处将显示为乱码。请仔细阅读相关政策与条款之后, 在“**I Accept**”, 前面打“✓”, 并点击“**Next**”进行下一步。

## Preferences

Preferred Certificate Name \* 

■■■■■

证书偏好用名（只显示英文，请填写中文姓名拼音）

I agree to the

[ISACA Exam Security Terms](#) and [Code of Professional Ethics](#)

I Accept \*

Please click Next to proceed.

Cancel

Previous Step

Next

请按照要求并使用英文（或拼音）填写您的（家庭或公司）地址，街道（Street）地址不需要过于详细，小区名称及个人家庭住址门牌号可以不填写，但是请记住填写正确的邮政编码。填写之后，点击“Next”。

\*Home Street

■■■■■

●

\*Home City

■■■■■

\*Home Country/Region Code

■■■■■

\*Home State/Province Code

■■■■■

●

\*Home Zip/Postal Code

■■■■■

Preferred Billing

Preferred Mailing

进入考试偏好选择的界面。

特别提醒，受限于跨境互联网连通性问题，目前 ISACA 提供的远程考试的用户体验不理想。强烈建议您采用去线下考点考试的方式。如果您坚持采取远程考试的方式，也请务必提前按要求下载浏览器插件，并测试系统以及网络环境。考生须对在线考试中可能出现的网络连通性问题及其影响，和最终可能导致考试成绩不理想的后果做好充分的物理和心理准备。

## Exam Preferences

### Remote Proctoring

If you want to take advantage of online remote proctoring, your system must meet all [requirements](#) prior to completing the registration process. Run a [compatibility check](#) with our exam administrator (PSI).

Additionally, please run a [diagnostic check](#) to confirm sufficient bandwidth and connectivity to the remote proctoring video server. For the best exam experience, we recommend using the latest version of the [Chrome Browser](#).

My system passes the compatibility check/I plan to take my exam at a test center \*

请阅读条款及须知后保持此处勾选状态

如果因为身体缺陷等问题需要特殊的考试设备可勾选“I have a disability which requires special accommodations during the exam”，如不需要，请不要随意勾选。

另外，目前中国只有香港分会与澳门分会，若您不希望把您的信息共享给所在地的 ISACA 分会，可以不做勾选，然后点击“Next”。

### Testing Accommodations by Special Request

If you have a disability requiring certain testing accommodations, such as extended testing time, special exam presentation, or having food and drink during the exam, you can request special accommodations. **Please note, remote proctored exams are open to all candidates and do not require any special request.**

By checking the box below, you will be sent special instructions on how to schedule your exam. You will need to submit the [Special Accommodations Request Form](#). ISACA will need to approve your request and provide further instructions to scheduling your exam.

I have a disability which requires special accommodations during the exam.

I understand that by checking the box I cannot schedule my exam until I submit the Special Accommodations Request Form and ISACA approves the request.

### Local Chapter Release (Not Applicable to CMMI Exams)

Chapters may use this information for promoting chapter sponsored activities, including exam study courses.

I authorize the release of my contact info to my local ISACA chapter

Please click Next to proceed.

Cancel

Previous Step

Next

点击“Continue”。

REGISTER

### Purchase Validation

Continue

直接点击“Check Out” 进行下一步。



## Purchase Membership

Save on this purchase by becoming an ISACA member. (Not applicable for CMMI exam registrants)

Join as a Member

Checkout

确认右侧“item” 显示应付金额为“0” 之后，点击“Continue” 进入下一步。

The below addresses are what is stored in your address book and contact record. While the addresses are read only on this page, you have the ability to update these addresses in checkout and will then be brought back to this page for review. Please review your addresses for accuracy before proceeding with your transaction.

Your home address may appear as your business address if you have recently completed the membership join process or exam registration and DID NOT provide a business address. Again, you can update your addresses in checkout and will then be brought back to this page for review.

### Home Address

██████████  
██████████  
██████████

### Business Address

██████████  
██████████  
██████████

### Order Summary

Items (1): 0

Total Calculated at Checkout

#### Refund Policy

If the purchase is to be used or consumed in carrying out the operations of an exempt entity or purchased for resale, validation of tax exemption is required prior to placing an order. Please contact the Tax Department at tax@isaca.org to validate tax exemption.

Continue

By clicking the Continue button and completing this transaction, you are agreeing to the [terms of use](#).

确认姓名拼写和联系电话无误之后，请点击“Proceed to Billing”。

<p>Shipping/Tax Address</p> <p>*First/Given Name <input type="text"/></p> <p>*Family Name/Surname <input type="text"/></p> <p>*Phone <input type="text"/></p>	<p>Order Summary</p> <p>Items (1): 0</p> <p>Total Calculated at Checkout</p> <p><a href="#">Refund Policy</a></p>
<p>Donate</p> <p><input type="checkbox"/>  <b>Support the Future of the Digital World</b></p> <p>Would you like to make a donation in support of ISACA foundation?</p>	

Proceed to Billing

There is no payment due. Click proceed to Billing and then Confirm Order button on the next screen to complete the transaction.

请再次核对您的姓名和地址信息，如有问题请返回信息填报页面进行修改，若确认无误，请点击“**Confirm Order**”。

<b>1. Tax Address</b>  请再次核对姓名及地址信息	<b>Order Summary</b> Items (1): 0 Due at Checkout: 0
<b>2. Choose a Payment Method</b> There is no payment due. Click the button below to complete your order. <b>Confirm Order</b> <a href="#">Having trouble? Contact Support</a>	<b>Shopping Cart</b>  CISA Exam Registration 0 Quantity: 1 List Price: \$760.00

显示付款成功界面（如下图）之后，即可在 ISACA 全球官网首页点击“**My ISACA**”进入“**Certifications & CPE Management**”界面预约您的考试。



## Payment Successful

Your payment of **\$0.00** was successfully completed.

Put your message here for Exam Instruction

**View Receipt**