

APPLICATION FOR RECERTIFICATION OF PSP CERTIFICATE LEVEL

Reply to: NAEOP PSP Registrar
Professional Standards Program
National Association of Educational Office Professionals
1999 N Amidon Ave., Ste. 325
Wichita, KS 67203

Place this form on the TOP of your application packet and include Form VI and appropriate signed documentation. Mail this application and \$25 to the NAEOP PSP Registrar at the above address or email to pspregistrar@naeop.org with payment. Make checks or money order payable to the National Association of Educational Office Professionals. VISA, MasterCard & Discover are accepted. A \$5 convenience fee is added to all credit card, debit card and P-cards used for payment. PLEASE COMPLETE ELECTRONICALLY AND PRINT OR EMAIL.

Date Membership Number (See membership card or recent mailing label)

Name of Applicant Previous Name(s) (if applicable) (Name as you wish it to appear on the Recertification Certificate)

Address Mailing Address City State ZIP+4

Work Phone Home Phone FAX

Email Address

Highest PSP Certificate Level Option Date on Certificate

Continuous NAEOP member since

If paying application fee by credit card, please insert information at the bottom of the form.

For Office Use Only

- 60 hours of continuing education verified
5 years continuous NAEOP membership verified
10 points Association Responsibility

Recertification is: approved not approved

Remarks:

Date NAEOP PSP Registrar

Credit card: Visa MasterCard Discover

Name on credit card

Credit card number

Security code Expiration

Signature

**BACK OF FORM V**  
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