





APPLICATION FOR CCLS RECERTIFICATION

Mail Application for Recertification and fees of \$40 payable to "LPI" to the following address:

Sally Butterworth, CCLS 895 Rushings Trace Alpine, CA 91901

Email: ccls.cbm4@legalprofessionalsinc.org

		
Name:		
Home Mailing Address:		
Last 4 digits of SSN: Email:		
Phone (Day): Phone(Evening):		
LPI Member: Yes No Name of Local LPI Association:		
Name of Local LPT Association.		
Recertification Fees (Select Payment Type) Payable to "LPI" Mail to above address Check Payable to "LPI" Mail to above address Cleck Email Application to ccls.cbm4@legalprofessionalsinc.org. Payment link will be provided by email.		
I have completed the required 15 hours of continuing education during a three-year period. Certificates of attendance for the recertification period are attached or have previously been provided to the Certifying Board.		
I retired from the legal secretary profession, effective I certify that I no longer perform duties required of a legal secretary. (No fees are due.)		
I am retired as of, but wish to keep my CCLS active. I have completed the required 15 hours of continuing education during a three-year period. Certificates of attendance for the recertification period are attached. (Include a \$25 renewal fee.)		
I am a member of the California State Bar effective (No fees are due.)		
I have reviewed the "CCLS Standards for Recertification" and have complied with the recertification requirements outlined in it.		
Date:		
Applicant Signature		

Space below for CCLS® Certifying Board use only.	
Date Certified:	
Recertified:	
Expiration Date	