

**OkASBO
PROFESSIONAL CERTIFICATION
RENEWAL APPLICATION**

NAME: _____

POSITION/JOB TITLE: _____

EMPLOYER: _____

EMPLOYER'S ADDRESS: _____

PHONE: () _____ FAX: () _____

E-MAIL: _____

CERTIFICATE EARNED: CSBS CSBO CSBA

DATE AWARDED: _____

<u>Renewal Requirements:</u>	CSBS	CSBO	CSBA
Points	20	25	30

Renewal Procedures

1. No application will be accepted without continuing education points.
2. Accumulation of points begins after the award of your certificate.
3. Renewal is required within three years of award. If certificate expires without renewal, recertification requires a new application meeting current requirements and completion of the points.

Enclosed is Renewal Fee of \$50.00.

I certify that the information in this Renewal Agreement is correct.

Signature

Date

