



California Certified Legal Secretary
A Program of LSI®



APPLICATION FOR CCLS® RECERTIFICATION

Mail Application for Recertification and fees of \$25 payable to "LSI"
to the following address:

April K. Ignaitis, CCLS, CCLS Recertification Chair
P.O. Box 2879
Cupertino, CA 95015-2879

Name:	_____		
Mailing Address:	_____		
Last 4 digits of SSN:	_____	Email:	_____
Phone (Day):	_____	Phone (Evening):	_____
LSI Member:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Name of Local LSI Association:	_____		

Recertification Fees
(Select Payment Type)

Check
Payable to "LSI"
Mail to above address

PayPal
Email Application to
CCLSRecertification@gmail.com
Payment link will be provided by email
upon approval of recertification.

- 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 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 _____