

RECORD OF EXPERIENCE AND EDUCATION

Refer to the Professional Standards Program booklet and enter information requested below. Mail together with a \$45 PSP certificate application fee to the NAEOP PSP Registrar, National Association of Educational Office Professionals, 1841 S. Eisenhower Ct., Wichita, KS 67209. Make check or money order payable to the National Association of Educational Office Professionals. VISA, MasterCard & Discover are accepted, but will be charged a \$5 surcharge, if used as payment. Applicant must be a member of NAEOP. **THIS FORM MUST BE TYPED.**

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

Name _____ Previous Name(s) (if applicable) _____
(Name as you wish it to appear on the PSP Certificate)

Mailing Address _____ City State ZIP+4 _____

Email Address _____

Work Phone () _____ Home Phone () _____ FAX () _____

Certificate level and option for which application is being made: _____
Level Option

EXPERIENCE

List work experience (in the field of education and/or business) since high school graduation. Record in reverse chronological order, beginning with current year.

Name of school or business	Address of school or business	Job Title (ex: secretary, bookkeeper, etc.)	Dates of Employment	
			From: Mo./Yr.	To: Mo./Yr.
Anchorage School District	5530 E Northern Lights Blvd. Anchorage, AK 99504			

Name on Credit Card _____ Credit Card: VISA MasterCard Discover

Credit Card Number _____ Expiration _____

Signature _____