



California Certified Legal Secretary  
A Program of LPI®



## APPLICATION FOR CCLS® RECERTIFICATION

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

**Maria Bishop, CCLS**  
**3191 Rohrer Drive**  
**Lafayette, CA 94549**

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

Recertification Fees  
(Select Payment Type)

**Check**   
**Payable to "LPI"**  
**Mail to above address**

**Stripe**   
**Email Application to**  
**ccls.cbm3@legalprofessionalsinc.org.**  
**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: \_\_\_\_\_