



ABC CERTIFICATION SHORT FORM

Please read Certification Procedures as well as Rules & Regulations first. Then complete this Short Form Application and return along with your fee to:

American Board of Certification
4403 1st Avenue SE, Suite 113
Cedar Rapids, Iowa 52402
Phone (319) 365-2222
Fax (319) 363-0127
Toll Free (877) 365-2221

Short Form Application for Certification (please type or print)

Name: _____

Firm: _____

Address: _____

City: _____

State: _____

Zip: _____

Phone: _____

Fax: _____

Email: _____

Social Security Number: _____

I am applying for certification in:

Business Bankruptcy (\$495) _____

Consumer Bankruptcy (\$495) _____

Creditors' Rights (\$495) _____

Note: The second and subsequent specialty areas are \$300.

DISCOUNT FOR PRACTICING ATTORNEYS—10 YEARS OR LESS APPLICATION FEE (\$295)

If paying by Credit Card (Visa, MasterCard or American Express only)

Credit Card Number: _____

Expiration Date: _____

Card Holder Name: _____

Signature: _____

I have reviewed the summary of the ABC certification standards and believe that I am qualified by certification as listed above. By submitting this short form application, I agree to be bound by all rules and regulations of the ABC. I also understand that application fee(s) are non-refundable, even if I choose not to complete the certification process, my application is not approved by the ABC, and/or I do not successfully complete the certification exam. ABC is incorporated in the State of Virginia and the laws of Virginia shall govern both this application and any disputes between the applicant and ABC, its officers, directors, employees or volunteers.

Print Name: _____

Sign: _____

Dated: _____