



JUDICIAL BRANCH CERTIFICATION COMMISSION

Office of Court Administration

Guardianship Certification Exam Registration Form

Please Type or Print Legibly.

\$175 fee paid by check or money order payable to the Office of Court Administration.

Submit application with payment and a copy of your photo identification to:

P O Box 12066, Austin, TX 78711-2066 (regular mail) **OR**
205 W. 14th St., Ste. 600, Austin, TX 78701 (overnight delivery)

(All fields must be completed. Notifications to applicants will be sent via email.)

Applicant Information	
Full Name: <i>(Last, Suffix, First, Middle)</i>	
Name you would like on your certification: <i>(Last, Suffix, First, Middle)</i>	

Mailing Address: <i>(Include city, state, and zip)</i>			
Phone #:		Cell #:	
		Fax #:	
Email Address:			
Examination Date & Time:			

Business Contact Information			
Name/Employer:			
Business Address: <i>(Include city, state, and zip)</i>			
Phone #:		Fax #:	
		Email Address:	

Provisional Certification	
Do you currently have a provisional certification? <i>(Check one. If 'yes', provide your provisional certification #):</i>	Yes <input type="checkbox"/> or No <input type="checkbox"/> Certification #: _____

Additional Exam Information	
Test History:	<input type="checkbox"/> I have tested before <input type="checkbox"/> I have not tested before.
Date(s) Previously Tested:	

Signature of Applicant

Date