

Request for Certified Paralegal Retired Status

| l, | |
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| (Name) hereby swear or affirm that: | |
| nereby swear or animm that: | |
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| I have been certified for more than five years; I am at least 55 years of age or older; I have retired from employment as of | |
| | |
| | · |
| (Date) | |
| I understand that if the Retired status any time it is used. | s is permitted, my credential must be shown as CP Retired |
| required to meet the same requirements \$125 will be required to reactivate the cr | n to work I will no longer retain Retired status and will be ents as all other Certified Paralegals. A reactivation fee of redential, with the five-year recertification period remaining the CP is in retired status past the last recertification date, a new of reemployment. |
| Dated thisday of | , 20 |
| Signature | Name (please print) |
| Address | City State ZIP |
| E-mail: | |
| Note: We will communicate by e-mail re | garding this form If this is not acceptable check here: |