



6450 S Lewis Ave, Suite 250 | Tulsa, OK 74136 | PH: 918-587-6828 | FAX: 918-582-6772 | www.nala.org

Certified Paralegal (CP) Examination  
Request for Waiver of Eligibility Requirements

I, \_\_\_\_\_, understand that my application for the Certified Paralegal examination is being accepted contingent upon evidence that I will meet at least one of the eligibility categories, and will provide original documentation verifying my eligibility by submitting a copy of my final degree transcript by: **June 30, 2023** (if authorized to test January through May) or **January 31, 2024** (if authorized to test June through December).

I also understand that if, for any reason, I am unable to meet one of the eligibility categories, or have not provided the original documentation verifying my eligibility, by **June 30, 2023** (if authorized to test January through May) or **January 31, 2024** (if authorized to test June through December), I will forfeit all CP examination fees paid and my examination will not be graded. To reapply, a new application, fee, and supporting documentation are required.

I also understand that if I have completed all requirements of the program, except for the graduation ceremony, I may provide a letter from my program director, on school letterhead, verifying my eligibility.

I will be responsible to provide the evidence of my eligibility to the NALA Certifying Board, c/o NALA, at the address shown above, no later than 5:00 p.m. (CST) on **June 30, 2023** (if authorized to test January through May) or **January 31, 2024** (if authorized to test June through December).

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name (please print)

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State ZIP Code

Signed and sworn before me, the undersigned authority on this \_\_\_\_\_ day of \_\_\_\_\_, in 20\_\_\_\_.

Notary Public County or Parish

State

My commission expires