Expiration Date Change Request Form

By my signature below I authorize PCB to change the expiration date of the indicated credential(s) to that of my original credential. In this way, recertification for both or all credentials may occur with the same application, most or all of the same education (depending on the credential) and date. I also acknowledge that I may be gaining time or losing time by the expiration date change.

I understand that changing an expiration date may possibly shorten the time I have to accrue continuing education, and no extensions of time or grace period will be granted. Recertification will be due on the new expiration date. (It may be beneficial to delay your date changes if you are in danger of not meeting your obligation of recertifying by the expiration date).

_____ _____
Signature Date

A new certificate will be sent to you upon expiration date change.

Please print name clearly: _____

Address:_____
Street City St Zip

Work Phone: _____

Email: _____

My original credential is a _____ with a current expiration date of _____.

Please change the following credential's expiration date to that of my original credential's date:

1. _____ _____ 3. _____ _____
Acronym current expiration date Acronym current expiration date

2. _____ _____ 4. _____ _____
Acronym current expiration date Acronym current expiration date

Please mail or fax to PCB along with the fee of $25 per credential to be changed. Fee can be paid using one of the following (Check or Money Order to PCB):

( ) Check /MO $_____ Credit Card _____ - _____ - _____ - _____

( ) VISA/Mastercard $_____ 3-Digit security code: _____ Exp Date: _____ /_____

_____
Name on card