

**APPLICATION FOR CERTIFIED KENTUCKY PARALEGAL
EXAMINATION**

3. EDUCATIONAL LEVEL ACHIEVED

- Associate's degree
- Bachelor's degree
- Bachelor's degree including
paralegal studies
- Master's degree or higher

4. MEMBERSHIP

- Member of Kentucky Paralegal Association (KPA)
- Member of local association

Association Name

5. SPECIAL ACCOMODATIONS

- Yes
- No

If checked Yes, please state your disability and special accommodation required:

6. REGISTRATION FEE - \$100.00

Please enclose a check or money order made payable to **CKPP, Inc.** and mail to the address below:

Kentucky Paralegal Association
C/O CKP Exam
P.O. Box 2765
Louisville, KY 40201-2675

**APPLICATION FOR CERTIFIED KENTUCKY PARALEGAL
EXAMINATION**

7. ORIGINAL DOCUMENTATION REQUIRED

If you are applying under the Educational Requirements, the following documents must be enclosed:

- Official transcript, not a diploma (highest level of education)
- Two (2) letters of reference from an Attorney who must be a member of the Kentucky Bar Association, or a Judge of the Kentucky Court System or Sixth Circuit Court.

OR

If you are applying under the five (5) years work experience as a paralegal under the constructive credit for the education requirements, the following documents must be enclosed:

- Notice of Intent to Seek Constructive Credit (available on the web site)
- Letter(s) of employment verification (verifying at least five years legal experience)
- Two (2) letters of reference from an Attorney who must be a member of the Kentucky Bar Association, or a Judge of the Kentucky Court System or Sixth Circuit Court.

**APPLICATION FOR CERTIFIED KENTUCKY PARALEGAL
EXAMINATION**

CKP Affidavit of Education and Work Experience

First Name MI Last Name Previous Name (if applicable)

Title/Position Current Employer

Current Employer's Address City/State/Zip

Business telephone number (Area code)

E-mail address(es)

EDUCATION: (Copy of diploma or official transcript must be attached)

A. Institution: _____ Major: _____

 Degree/diploma obtained: _____ Date of diploma/degree: _____

B. Institution: _____ Major: _____

 Degree/diploma obtained: _____ Date of diploma/degree: _____

PARALEGAL WORK EXPERIENCE: Most current or recent employment first; if applying under experience only requirement, provide all verifiable paralegal work experience in the last five years; education plus experience requirement, provide most recent four years substantive experience.

1. _____
Employer Start Date End date

Employer Address Supervisor's Name

Supervisor's address and telephone number

Description of duties (Be specific: document substantive and administrative legal duties)

**APPLICATION FOR CERTIFIED KENTUCKY PARALEGAL
EXAMINATION**

_____ Full-time _____
Average hours worked per week

_____ Part-time _____
Average hours worked per week

APPLICANTS' SIGNATURE: I CERTIFY THAT THE INFORMATION SUBMITTED IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I VOLUNTARILY AGREE, UPON CERTIFICATION, TO MAINTAIN ACTIVE MEMBERSHIP IN KPA AND COMPLY WITH KPA PARALEGAL PROFESSIONAL STANDARDS OF CONDUCT AND DISCIPLINARY PROCEDURES INCLUDING ANY INVESTIGATORY PROCESS.

SIGNATURE: _____

State of: Kentucky

County of _____

Subscribed and sworn to before me this _____ day of _____, 20____.

My Commission Expires: _____

NOTARY PUBLIC, STATE AT LARGE