



STATE OF NEVADA
Certified Court Reporters Board

5135 Camino Al Norte, Suite 270
North Las Vegas, Nevada 89031
Phone: (702) 489-8787 Fax: (702) 489-8788
Website: www.crptr.nv.gov Email: Reporting@nvccrb.nv.gov

REGISTRATION of a COURT REPORTING CERTIFICATE

REV: 8/15

Licensing Year: July 1, 2015 – June 30, 2016
Fee: \$200.00 (see below)

Pursuant to NRS 656.220, the initial registration fee that will expire less than 1 year of the current licensing year, the fee will be \$100.00.

Payment must accompany this application. Make check payable to NVCCRB.

LEGAL NAME ONLY

FIRST NAME	M.I.	LAST NAME	
ADDRESS			CITY/STATE/ZIPCODE
TELEPHONE	FAX	CELLULAR	EMAIL ADDRESS
BUSINESS NAME		TELEPHONE	
ADDRESS	CITY	STATE	ZIPCODE

REQUIRED INFORMATION

Contact information to be posted on the Board website.

EMAIL	PHONE NUMBER		
Nearest Relative or Contact Person (not living with you)			
NAME	RELATIONSHIP	TELEPHONE	
ADDRESS	CITY	STATE	ZIPCODE

REPORT OF EXISTENCE OF NEVADA BUSINESS LICENSE

All applicants MUST complete this section. Please select ONE option.

- I have a Nevada business license number assigned by the Nevada Secretary of State upon compliance with the provisions of NRS Chapter 76.
My Nevada business license number is: _____
- I have applied for a Nevada business license with the Nevada Secretary of State upon compliance with the provision of NRS Chapter 76 and my application is pending.
- I do NOT have a Nevada business license number.

The State of Nevada Certified Court Reporters Board is not the arbiter of determining whether the applicant needs a business license. **PLEASE DO NOT CALL OUR OFFICE.** Information about the Nevada business license can be found on the Secretary of State's website at: <http://nvsos.gov/>

QUESTIONNAIRE

1. NRS 656.155 requires an applicant for the issuance or renewal of a certificate to complete the statement prescribed by the Welfare Division of the Department of Human Resources.

You are required to check one:

- I am not subject to a court order for the support of a child.
- I am subject to a court order for the support of one or more children and in compliance with the order or in compliance with a plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order; or
- I am subject to a court order for the support of one or more children and **not** in compliance with the order or in compliance with a plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order.

2. Have you been convicted of or pled guilty to any violation of any law (excluding minor traffic violations) of any state, the United States, or a foreign country or had any conviction that has been dismissed? If you answer yes to the conviction question, please submit copies of the court records to the NVCCRB. Upon receipt, the NVCCRB will review the information to determine the status of your application.

- Yes
- No

3. Has there been any disciplinary action (excluding citations and fines) taken against you by any licensing and/or regulatory agency in this or any other state?

- Yes
- No

If you answered yes, please state date, place, entity and details: _____

You are required to check one:

- I am a military veteran.
- I am an active duty service member.
- I am not a veteran.

AN INCOMPLETE APPLICATION WILL BE RETURNED TO YOU AND WILL RESULT IN THE DENIAL OF YOUR APPLICATION OF CERTIFICATE.

I, _____ attest to the foregoing statements in this Application of Certificate which I have read and know the contents thereof to be true, complete and accurate in accordance with the provisions of NRS 656 and NAC 656. I understand omission of information, or false information may cause my application for certification to be denied. I specifically authorize and request the release of any and all information, whether of record or not, by any person who receives such a request from this state certifying board. I have read and possess knowledge of the provisions and requirements of NRS 656 and NAC 656 and hereby affirm that I am in compliance therewith.

Signature

Date