

Name of Business:

П

STATE OF NEVADA CERTIFIED COURT REPORTERS BOARD

5135 Camino Al Norte, Suite 270 North Las Vegas, Nevada 89031 Phone: (702) 489-8787

Website: www.crptr.nv.gov Email: NVCCRB@gmail.com

REGISTRATION for a COURT REPORTING CERTIFICATE

3/24

Licensing Year: July 1, 2024 – June 30, 2025 Fee: \$200.00

Payment Options:

- Pay my mailing in a completed form, along with your payment. Make check payable to NVCCRB.
- Electronic payment is available during business hours only. You must submit your completed form before requesting our electronic payment service. A 2.9% service fee is applied to all transactions.

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.

Please	e check one:			
	\square CCR – Certified Court Repor	~ ·	,	
	☐ CCR-V – Certified Verbatim	Reporter (voice wri	ter)	
	Payment must accompany	this application. Mak	e check payable to NVCCH	<i>RB.</i>
LEGAL N	JAME ONLY			
FIRST NAM	E MIDDLE NAME OR IN	TIAL	LAST NAME	
ADDRESS			CITY/STATE/ZIPCODE	
HOME PHO	NE CELLULAR		EMAIL ADDRESS	
Public conta	ct information to be posted on the Board's website:			
EMAIL			PHONE NUMBER	
Nearest	t Relative or Contact Person (not living	; with you):		
NAME		RELATIONSHIP	TELEPHONE	
ADDRESS	CITY	STATE	ZIPCODE	
			BUSINESS LICENSE	
	All applicants MUST co	omplete this section.	Please select ONE option	n.
	I have a Nevada business license r		he Nevada Secretary of S	State upon
	compliance with the provisions of I	-		
	My Nevada business license numb	er 18.		

The State of Nevada Certified Court Reporters Board is not the arbiter of determining whether the applicant needs a business license. <u>PLEASE DO NOT CALL OUR OFFICE</u>. Information about the Nevada business license can be found on the Secretary of State's website at: http://nvsos.gov/ or by calling 775-684-5708.

with the provision of NRS Chapter 76 and my application is pending.

I do NOT have a Nevada business license number.

I have applied for a Nevada business license with the Nevada Secretary of State upon compliance

_	you a Military Veteran Yes No Or, Active Service Member? authorized unswered yes, please answer the following questions:	l Yes □ No		
1.	Have you ever served on active duty in the Armed Forces of the United States and separated from such service under conditions other than dishonorable? \Box Yes \Box No			
2.	Have you ever been assigned to duty for a minimum of 6 continuous years in the National Guard or a reserve component of the Armed Forces of the United States and separated from such service under conditions other than dishonorable? \Box Yes \Box No			
3.	Have you ever served the Commissioned Corps of the United States Public Health Service or the Commissioned Corps of the National Oceanic and Atmospheric Administration of the United States in the capacity of a commissioned officer while on active duty in defense of the United States and separated from such service under conditions other than dishonorable? \Box Yes \Box No			
	QUESTIONAIRRE			
1.	Date you passed the Nevada certification examination:			
2.	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:			
	\square I am <u>not</u> 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 ch the order or in compliance with a plan approved by the dis- agency enforcing the order for the repayment of the amount or	strict attorney or other public		
	I am subject to a court order for the support of one or more consists with the order or in compliance with a plan approved by the diagency enforcing the order for the repayment of the amount of	istrict attorney or other public		
3.	Have you ever been convicted of any offenses other than a minor traffic violation? \square Yes \square No If you answered yes, please submit the date, time, place and disposition on a separate sheet an attach to your application. Upon receipt, the Board will review the information to determine the status of your application.			
4.	Has there been any disciplinary action (excluding citations and fin licensing and/or regulatory agency in this or any other state? \Box Yes			
	If you answered yes, please state date, place, entity and details:			

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.

	firm.		
——————————————————————————————————————	In accordance with NAC 656.330, I will not knowingly enter into any contract or agreement to provide court reporting services that may compromise the impartiality of the court reporter or		
INITIAL	In accordance with NAC 656.320, I will not engage in the practice of court reporting on behalf of a firm that is not registered with the Board. I will verify whether a firm is registered with the Board before engaging in the practice of court reporting on Nevada cases.		
INITIAL	In accordance with NRS 656.260, I agree to notify the Board of any changes to my name, address, telephone and email address, in writing, within 30 days of the change.		
INITIAL	In accordance with NAC 656.205, I possess a basic understanding and knowledge of the applicable laws, regulations, and court and procedural rules governing the practice of court reporting in this State.		

Social Security (Pursuant to NRS 656.155(1a)