

**TEXAS  CERTIFIED TRANSFER to  
CBRPC RECREATION THERAPIST CERTIFIED APPLICATION**

*Anyone with a current Recreation Therapy certification from Texas is automatically certified through CBRPC. Complete and return the following information and payment page to: CBRPC, Inc PO Box 900489 Palmdale, CA 93590-0489. Once our office receives the information, a certificate, wallet card, lapel pin and information about renewal and earning 2.0 CEU's every two years will be mailed out to you. There is a nominal processing fee- see payment form.*

*Please print clearly*

<b>I. INFORMATION</b>													
Check: <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms <input type="checkbox"/> Jr. <input type="checkbox"/> Sr. <input type="checkbox"/> Dr. <input type="checkbox"/> PhD					Date of Birth:     /     /								
Texas Certification #			Expiration Date:			Attach a copy of wallet card or certificate							
Full Name:													
Mailing Address													
								Apt/Space:					
City:				State:			Zip Code:						
Phones- include area codes													
Home:					Cell:								
Work:					Fax:								
<b>II. Employer</b>													
Name of Agency/Organization:													
Address:													
City:			State:			Zip Code:							
Your Job Title:													
University where you received your RT/TR degree:													
Number of years in the field? <input type="checkbox"/> F/T <input type="checkbox"/> P/T <input type="checkbox"/> Per Deim <input type="checkbox"/> Consulting <input type="checkbox"/> Unemployed													
<b>RTC INCOME- Please check your current (approximate) hourly rate of pay</b> (How to calculate: take bi-monthly or monthly gross income and divide it by the number of hours you worked for that pay period and you will get your hourly rate of pay)													
	\$5-9		\$21-24		\$35-39		\$50-54		\$65-69		\$85-89		\$95-99
	\$10-14		\$25-29		\$40-44		\$55-59		\$70-74		\$75-79		\$100
	\$15-20		\$30-34		\$45-49		\$60-64		\$80-84		\$90-94		\$125 +
<b>III. ETHNICITY/CULTURE- Check all that apply directly to you</b>													
White or Caucasian			Japanese			Guamanian							
Black or African American			Korean			Mien							
American Indian or Alaska Native			Other Pacific Islander			Laotian							
Filipino			Samoan			Vietnamese							
Chinese			Asian Indian			Latino							
Cambodian			Native Hawaiian			Other:							
Hmong			Other Asian			Unknown/ Not Reported							
<b>IV. Client/Consumer Population you have worked with (check all that applies)</b>													
Abused		College/University Students		Hospice Care		Sex Offenders							
Acute Care		Developmentally Disabled		Mental Health Condition		Sexually Transmitted Diseases							
Aged		Eating Disorders		Pediatrics		Special Education Students							
Alzheimer's /Dementia		Forensic/Prisons/Detentions		Oncology		Substance Abuse							
Blind/Visual Impairments		Head Trauma/Injury		Physical Rehab.		Youth at Risk							
CVA		HI/Deaf		Public School Students		Other:							
<b>V. Declaration</b>													

I hereby declare that the information contained on this application and any attachment hereto is accurate to the best of my knowledge and belief.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

California Board of Recreation and Park Certification, Inc  
**TEXAS CERTIFIED TRANSFER PAYMENT FORM**

FEES- Posted by Deadline Date	Check that apply	Amount
Transfer fee for certificate, wallet card and lapel pin		\$ 60.00
processing credit card fee		\$ 5.00
<b>Total Enclosed</b>		\$

**PAYMENT INFORMATION**

Credit Card Payment Information: Check one


 

<b>Card Number:</b>
<b>Expiration Date:</b>
<b>Cardholder Name:</b>
<b>Cardholder Signature:</b>
<b>Cardholder Address:</b>
<b>Date:</b>

**PAYMENT MADE BY CHECK OR MONEY ORDER DOES NOT REQUIRE A PROCESSING FEE**

<b>Attach Check/Money Order Made Payable to: CBRPC , Inc</b>	
<b>Mail this Form &amp; Completed Examination form with check/money order to:</b> CBRPC PO Box 900489 Palmdale CA 93590-0489	
<b>Check #</b>	<b>Money Order/Cashier's Check</b>