



THE NATIONAL BOARD
OF SURGICAL TECHNOLOGY
AND SURGICAL ASSISTING

Initial Currency Application (Pre September 1, 1977)

INSTRUCTIONS:

Allow 4 - 6 weeks for processing. Obtaining currency as a Pre September 1, 1977 is optional. If you have any questions, please contact the NBSTSA Recertification Department directly at (800) 707-0057 or email questions to mail@nbstsa.org.

Last Name, First (**Legal name**), Middle (PLEASE PRINT)

Maiden Name

Other Name(s) You Have Used (if applicable, please include documentation of name change)

Mailing Address (include apartment # if applicable)

City

State

Zip Code

Home Phone Number

Work Phone Number

Cell Number

Social Security Number

Certification Number

Initial Currency Date

Email

Secondary Email

Are you a National Member of AST? No Yes, member number _____

PLEASE CHECK THE BOX THAT APPLIES TO YOU:

Obtain currency by credits. Enclosed is a copy of verification from the AST that my credits have been processed.

Obtain currency by examination. I choose to take the national certifying examination for the surgical technologist to become current.

Enclosed is a copy of my:

Driver's license or State ID

Passport

Naturalization Paperwork

SPECIAL ACCOMMODATIONS:

Are you requesting special accommodations due to physical impairment(s) or disability? Yes No

If you are requesting special accommodations, you must include a comprehensive report from a qualified physician describing your disability and/or any other documentation which will assist in an informed decision by the NBSTSA regarding your request for accommodations as described in the Guidelines for Applying for Special Accommodations, which can be found on nbstsa.org.

FEES:

Renewal by credits \$0.

Renewal by examination: AST/ASA Member \$190. All other \$290.

RUSH: Please rush my application. I've enclosed the non-refundable \$50 fee **in addition** to renewal fees. Rush processing will expedite your application within 3-5 business days. Excludes mailing time to the candidate.

TAPE COLOR PHOTO HERE

2x2 passport quality headshot
photo (white background only)
for certification card.



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Forms of Payment:

Money Order Personal Check Institutional Check Visa MasterCard

*Please make checks payable to "NBSTSA".

Billing Address (only if different from applicant info) City State Zip Code

Card Number Expiration Date

Signature Name (as it appears on card) Amount Charged

IMPORTANT: All applicants must sign the following statement:

I do hereby acknowledge that all the information submitted in connection with my application to the certification program is true and correct to the best of my knowledge. I understand that falsified information on this application is grounds for denial of acceptance for examination or certification revocation, and may bar me from future certifications. I further acknowledge and agree that the NBSTSA may release my examination scores and credentialed status to state agencies in those states which regulate the practice of surgical technology, to accredited surgical technology education programs, NBSTSA recognized programmatic accreditation agencies and NBSTSA contracted vendors.

Printed Name of Applicant

Signature of Applicant

Date

Would you like to receive other communication from the NBSTSA? Yes No

Refund: The following fees are NON-REFUNDABLE: application processing fees (\$60.00), RUSH processing fee (\$50.00) and/or examination fee after the approval of the application and issuance of an Authorization to Test letter.

RETURN THIS FORM, ALL NECESSARY DOCUMENTATION, AND ENTIRE FEE TO:

National Board of Surgical Technology and Surgical Assisting, 6 West Dry Creek Circle Suite 100, Littleton, CO 80120.