

INTERMEDIATE OR ADVANCED CERTIFICATION APPLICATION

AGENCY ADMINISTRATOR ATTESTATION

I certify that, to the best of my knowledge, _____
(insert applicant's name), meets all requirements for intermediate or advanced certification as requested, and that the applicant meets or exceeds the minimum standards of employment, training, education, and experience as set forth in the application and/or rules.

I state under penalty of perjury under the laws of Oklahoma that the foregoing is true and correct.

Signature

Date

Printed name and title