Certified Surgical First Assistant (CSFA) Renewal Application

THE NATIONAL BOARD OF SURGICAL TECHNOLOGY AND SURGICAL ASSISTING

Please read entire application and complete fully. If you have any questions, please contact the NBSTSA Certification Department directly at (800) 707-0057 or email questions to mail@nbstsa.org.

Current Last Name First **(Legal name)** Middle

Other Names You Have Used (e.g., maiden name, etc. Please include copy of legal documentation to change name on file.)

Mailing Address (include apartment # if applicable) City State Zip Code

Home Phone Number Work Phone Number Cell Number

Date of Birth Certification Number

Primary Email

Are you a member of AST? □ No □ Yes, member number_____

PLEASE CHECK THE BOX THAT APPLIES TO YOU:

□ **Recertify by credits.** All continuing education (CE) credits must be earned prior to expiration date (for number of credits needed go to nbstsa.org). CE credits must be submitted to AST for processing. Call (800) 637-7433 or visit ast.org for more information.

□ **Recertify by examination.** I choose to demonstrate competency through examination. Upon passing the examination I will receive a complimentary certification wallet card.

□ **Optional.** I would like to receive a certification wallet card for an additional $10 with my renewal by CE credits.

SPECIAL ACCOMMODATIONS:

Are you requesting special testing 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 Documenting a Request for Test Accommodations.

FEES:

- Renewal by CE credits fee $45
- Renewal by CE credits Late Fee: $100. I am submitting between one (1) and ninety (90) days beyond the expiration of my certification. All continuing education credits were earned within my cycle date.
- Renewal by examination: $550. A complementary certification wallet card will be issued with a passing score.
- Optional certification wallet card for individuals renewing by CE credit: $10

FEES:

If you are between one (1) and ninety (90) days beyond the expiration of your certification, you can renew IF you have earned all required continuing education (CE) credits DURING YOUR CERTIFICATION CYCLE. All CE credits must have been earned while you were certified and CANNOT be earned after you have expired. If you did not earn the required CE credits, please apply to take the examination for recertification. There is a $100 late fee for individuals who file their renewal application between one (1) and ninety (90) days after the expiration date IN ADDITION to the $45 renewal fee, for a total of $145 due if renewing your certification after the expiration date. An optional certification wallet card is available for individuals renewing by continuing education credits for an additional $10.

CSFA Renewal Application... Continued

Forms of Payment:

□ Money Order □ Personal Check □ Institutional Check □ Visa □ MasterCard □ Discover
*Please make checks payable to "NBSTSA".

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

Card Number Security Code Expiration Date $ Amount Charged

Signature (authorizes payment) Name (as it appears on card)

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 or renewals. I further acknowledge and agree that the NBSTSA may release my examination scores and credentialed status to agencies such as those which regulate the practice of surgical technology, current/potential employers, surgical education programs attended, NBSTSA recognized programmatic accreditation agencies and NBSTSA contracted vendors involved in the process of certification. I understand that NBSTSA CST/CSFA certificants may also have their names and credentials published in various NBSTSA publications from time to time such as when the NBSTSA is congratulating new certificants, etc.

Printed Name of Applicant Signature of Applicant Date

Would you like to receive other communication from the NBSTSA? □ Yes □ No
(i.e. Certification renewal reminders, newsletter, etc.)

Refund: The following fees are NON-REFUNDABLE: wallet cards, application processing fees (Renewal by CE credit $45, Examinations $100). Refunds will not be issued once application form is processed and an Authorization to Test email issued.

RETURN THIS FORM, ALL NECESSARY DOCUMENTATION AND ENTIRE FEE TO:
The National Board of Surgical Technology and Surgical Assisting
3 West Dry Creek Circle
Littleton, CO 80120

All NBSTSA forms are available and can be submitted online at www.nbstsa.org.