



Oklahoma State Board of Examiners
of Psychologists
421 NW 13th St., Suite 180
Oklahoma City, OK 73103
Phone (405) 522-1333
www.osbep.ok.gov

FOR BOARD USE ONLY: Date: _____ Fee: _____
--

FEE
\$100.00 per certificate
Check or money order
made payable to: OSBEP

NEW WALL CERTIFICATE REQUEST FORM

Name (as it appears on certificate): _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ License Number: _____

By signing this form, you are acknowledging there is a \$50.00 fee that needs to be submitted with this form, for a re-print of your official wall certificate/license. The fee needs to be submitted in the form of a money order, cashier's check, or personal check.

Signature

Date