

International Certification & Reciprocity Consortium (IC&RC)

Prevention Specialist (PS)

Application for Certification

1. Eligible applicants hold an active FCB Certified Prevention Professional (CPP) or Certified Prevention Specialist (CPS) credential in “certified” status. Individuals who are “CPP-Applicant in Process” or “CPS-Applicant in Process” will automatically earn the IC&RC PS credential as part of the FCB’s CPP and CPS application and award process.
2. Applicants must live or work at least 51% of the time in Florida at the time of application.
3. Partial, incomplete or illegible applications will be returned to the applicant.
4. Failure to agree to follow Florida Certification Board (FCB) policies and procedures may be grounds to disqualify an applicant from certification.

Section 1: Applicant and Eligibility Information.

1. Provide your name in the same format and spelling as is associated with your FCB eligible credential.

Last Name	Middle Name/Initial	First Name	Suffix

2. Indicate your FCB eligible credential and status.

- Certified Prevention Professional, certified
 Certified Prevention Specialist, certified

*The FCB has incorporated the IC&RC Prevention Specialist standards into the FCB’s Certified Prevention Professional (CPP) and Certified Prevention Specialist (CPS) credentials. Individuals seeking the FCB’s CPS or CPP credentials are required to pass the IC&RC PS exam as a condition of FCB certification. Upon award of the CPP or CPS credential, the IC&RC PS credential will be awarded. Upon CPP or CPS renewal, the certified professional will decide if he/she will or will not renew the IC&RC PS credential.

3. By my signature below, I affirm:

- a. At the time of this application, I live and/or work at least 51% of the time in the state of Florida.
- b. I have read, understand, and agree to follow the FCB’s IC&RC Prevention Specialist (PS) policies and procedures.
- c. The information I have provided is correct and truthful.

Signature

Date

Section 2: Fee Structure and Invoicing Information.

Check each fee included with this application. Fees are non-refundable.

- Application fee: \$50.
 Exam fee: \$185 per attempt.

Indicate your payment method

- My check or money-order is enclosed.

Check/MO Tracking Number: _____ Amount: _____

- Please invoice me for online payment by credit card (VISA, MasterCard, American Express)

- Credit card. Call the office to make a credit card payment. We will charge you a \$5 processing fee for each individual credit card payment manually processed by FCB staff.

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For FCB Use Only

Section 1: Eligibility Criteria Verification

CPP, certified

CPS, certified

Date Verified

Staff Signature

Section 2: Payment Information

Form of payment: Check/Money Order FCB Online Invoice Credit Card (phone payment)

Date Received _____ Date Approved _____ Staff Initials _____

Section 3: Exam and Credential Award Information

Date of Exam _____ Exam Score _____ Pass/Fail Status Pass Fail*

Date of PS award: _____

PS #: _____

*Attach FCB's IC&RC PS Re-TEST Documentation Form until a passing score is earned on the exam.