**CERTIFICATION PROCESS**

The following steps should be followed for certification. Certification Application Forms are available from the Continuing Education Coordinator at the Oklahoma Department of Libraries or from <https://libraries.ok.gov/librarians/library-development/public-librarian-certification/>.

For more information contact education@libraries.ok.gov or call 405-522-3322.

1. Complete the Certification Application Form.

2. A $20.00 fee is charged for initial certification (no fee is charged for renewal). Checks should be payable to the Oklahoma Library Association. DO NOT SEND CASH.

3. Mail or email fee and completed Certification Application Form, along with a copy of transcript (if applicable), confirmations of attendance at Public Library Academy classes, and/or a letter which details your qualifying library employment or experience, to:

Sadie Bruce, Continuing Education Coordinator

Office of Library Development

Oklahoma Department of Libraries

200 N.E. 18th St., Oklahoma City, OK 73105-3298

4. ODL will review and send the appropriate certificate to you.

5. Certificate will expire **three years from the date of issue**, unless renewal

process is completed.

Please note: Employment in a public library is not required to receive certification.

**CERTIFICATION APPLICATION FORM**

Instructions: Complete the following form and submit along with:

**\*$20.00 fee for certification, payable to Oklahoma Library Association. NO CASH.**

**\*Copy of transcript or diploma, if applicable**

**\*Confirmation of attendance at Public Library Academy classes,** to:

 education@libaries.ok.gov **OR**

Sadie Bruce, Continuing Education Coordinator

Office of Library Development

Oklahoma Department of Libraries

 200 N.E. 18th St., Oklahoma City, OK 73105

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Library Currently Employed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Library System: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of this Application: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Certification Level Requested: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Coursework or Degree Completed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Library Work Experience: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I hereby certify that the above information is true and correct to the best of my knowledge. I understand that any false statements may result in denial or revocation of the certificate.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant Signature Date signed