



Iowa Board of Certification

REQUEST FOR INACTIVE STATUS CPS & ACPS

Complete this form online, save it to your computer, and scan/email it to IBC at info@iowabc.org. It may also be printed and mailed to the IBC office with the applicable fee.

Be sure you carefully review the eligibility requirements for requesting Inactive Status (in the Counselor Handbook which is found on the IBC website) as well as IBC's policy and procedure for reactivating once you return to the field.

I am a: CPS ___ ACPS ___

Name (as shown on your certificate) _____

Home Address _____

City, State, Zip Code _____

Phone Number (____) _____ Cell _____ E-Mail _____

Note: It is essential that you provide an email address so you continue to receive notifications and updates from IBC

Certificate Number _____

Certificate Expiration _____

Reason for Requesting Inactive Status

Last Date working in the Prevention Field _____

Approximate date for returning to the Prevention Field _____

FEE

Inactive Fee (one year) \$85.00

Late Fee (if received 1-45 days late) \$50.00

TOTAL PAID (cash ___ check ___ Online with debit/credit/Paypal ___) _____

APPLICANT SIGNATURE _____

DATE _____