

ALNCCB[®]

The American Legal Nurse Consultant Certification Board

LNCC-Retired Credential Application

Please note: A \$75 fee must be submitted for your application to be complete. You will be invoiced following submission of this application.

This designation must be renewed every five years.

Name:

Address:

City: State: Zip:

Email:

Honor Statement:

I hereby apply for the LNCC-Retired status offered by the American Legal Nurse Consultant Certification Board (ALNCCB) for legal nurse consultants who have been certified. I confirm that I have been certified and working in the field of legal nurse consulting for a period of five years or more, and that I am retiring from active legal nurse consulting practice with no plans to return to a full or part time position.

Signature: _____ Date: _____

Please allow up to three weeks for processing.