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**ACKNOWLEDGEMENTS OF APPLICANT**

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The Applicant understands and acknowledges that it is within the sole discretion of the Keystone Alliance of Paralegal Associations to approve an application and bestow the Pennsylvania Certified Paralegal (Pa.C.P.) Credential upon an Applicant. The Credentialing Committee will determine within 30 days whether the Applicant meets the requirements for certification as established by the Keystone Alliance, and the Applicant will be notified by the Keystone Alliance Chairperson of the Committee’s decision.

The names of all approved Pa.C.P.’s will be posted on the Keystone Alliance website along with their approval dates and the names of their local associations. Approved Applicants will also receive a Certificate and a wallet card indicating that they have been awarded the Pa.C.P. Credential and the date of approval. In order to maintain standing as a Pa.C.P., a minimum of 12 CLE credits (with at least 2 of the credits in ethics) must be obtained within the two-year Certification Period which begins with the Pa.C.P.’s approval date and ends two years hence on the anniversary date. The Pa.C.P. is solely responsible for tracking CLE’s obtained during the Certification Period, for maintaining accurate and appropriate documentation of the said CLE’s and for submitting the Application for Renewal prior to his/her anniversary date. Forms and instructions relative to the renewal process are available on the Keystone Alliance website.

If an Applicant is denied certification, the Applicant may file an appeal within 45 days of receipt of the denial. Forms and instructions for filing an appeal are available on the Keystone Alliance website. In the event the appeal is denied, the Applicant must wait 6 months before he or she may reapply for the Pa.C.P. Credential.

The Applicant hereby acknowledges that he or she has no legal rights to take any legal action against the Keystone Alliance of Paralegal Associations, its members, officers and/or representatives acting on behalf of the Keystone Alliance of Paralegal Associations with respect to the application process, and/or the denial of the application process, and/or the denial of the certification by the Keystone Alliance of Paralegal Associations.

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**AFFIRMATION OF APPLICANT**

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I hereby affirm that I am a legal resident of the United States of America and that the statements made in the foregoing Application are true and complete to the best of my personal knowledge and/or on the basis of information and good faith belief. I understand that false statements herein are made subject to the penalties of 18 Pa. C.S.A. Section 4904, relating to unsworn falsification to authorities.

I further affirm that I will adhere to and be bound by the American Bar Association Model Rules of Professional Conduct and Minimum Standards and Professional Responsibility Guidelines for Paralegals in the Commonwealth of Pennsylvania that have been adopted by the Keystone Alliance of Paralegal Associations.

\_\_\_\_\_  
Date

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Signature