

Applicant First Name:

## **Treatment Provider**

9838 Old Placerville Road Sacramento, CA 95827 CASOMB@CDCR.CA.Gov

Thank you for your interest in (re)certifying as a Provider with the California Sex Offender Management Board. The first step in the certification process is to remit your application payment and the details below.

The fields below are **required** to be issued a login to CASOMB's online application system. Note that application fee covers the cost of review and Live Scan; accepted payment does <u>not</u> guarantee the applicant will meet the qualifications for CASOMB certification. Please provide a preferred e-mail where you would like login information sent. Upon receipt of payment, login instructions will be e-mailed to your preferred e-mail address within 3-5 business days.

## PLEASE TYPE THE BELOW INFORMATION

Applicant Middle Name:
Applicant Last Name:
Applicant E-mail Address:
Applicant Phone Number:
CASOMB Provider Agency Name:
CASOMB Supervisor:
Select the application you are requesting:
Student Provider: One-Year Certification
Student Initial / Recertifying Applicant (\$90.00)
Associate and Independent Provider: Two-Year Certification
Initial Applicant (\$180.00) Recertifying Applicant (\$100.00)
Currently certified providers can matriculate their CASOMB Provider Level <b>free of charge</b> during their certification period by e-mailing the CASOMB Certification Unit at CASOMB@CDCR.CA.Gov. The matriculating

CASOMB Certification Unit 9838 Old Placerville Road

Sacramento, CA 95827

**NOTE:** All fees are considered final. There will be no refunds. Payments are valid for 6 months. Applicants are responsible for any returned check fees.

Make checks payable to 'CASOMB'. Mail this completed form and check to:

application does **NOT** extend the certification period.

For CASOMB Certification Unit Staff:
Check #:
Amount Paid:
App E-mailed: