

**OREGON JUDICIAL DEPARTMENT**  
Certified Shorthand Reporters Program

**Application for Certification**

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*Your name, mailing address, and business phone number are not confidential.*

Applying for certification in the following reporting method (check one):

Stenographic

Voicewriting

Last Name \_\_\_\_\_ First \_\_\_\_\_ Initial \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Business Phone (optional) \_\_\_\_\_ Ext \_\_\_\_\_

Email Address \_\_\_\_\_

Please keep my email address confidential

Email addresses are used as the main contact method. To help us ensure ongoing communication, please keep our office updated with any changes.

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Do you possess a high school diploma or GED?  Yes  No

Have you ever had a shorthand reporter's certification, license, registration, or an equivalent revoked, suspended, resigned, or denied in Oregon or any other jurisdiction?  Yes  No

Have you ever been convicted of a crime?  Yes  No

If you answered 'yes', please attach an explanation on a separate sheet. (Conviction for a crime is not automatic grounds for disqualification, but conviction for a crime related to the qualifications, functions, or duties of a shorthand reporter may be grounds for denial of certification.)

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**QUALIFYING EXAM OR CERTIFICATION**

I qualify for certification on the following basis:

I passed all skills segments of a qualifying exam in the last 24 months.

Exam \_\_\_\_\_ Date(s) \_\_\_\_\_

I have never been Oregon certified but currently hold qualifying national certification.

Certification \_\_\_\_\_

 **Enclose proof of your exam dates and results or proof of qualifying certification**

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**CODE OF CONDUCT**

I have received a copy of the Code of Conduct for certified shorthand reporters and agree to abide by the code.

Initial here if you agree with the above statement \_\_\_\_\_

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**AFFIRMATION**

I certify and affirm that I have read the information contained in this form, that I personally completed this application or requested its completion, and that all the statements contained herein are true and complete.

\_\_\_\_\_  
Signature of applicant

\_\_\_\_\_  
Date

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Send your application, supporting documentation, and \$150 application fee (payable to the Oregon Judicial Department) to:

Certified Shorthand Reporters Program  
Office of the State Court Administrator  
Supreme Court Building  
1163 State Street  
Salem, OR 97301-2563