



**APPLICATION
CERTIFIED TAPT PUPIL TRANSPORTATION OFFICIAL
PROFESSIONAL CERTIFICATION
Use this form effective 1-1-2023**

Mail this application and \$50.00 application processing fee within 60 days of successful completion of the Official Exit Exam to: **TAPT Professional Certification Program, P.O. Box 488, Kemah, TX. 77565**

(After 60 days additional fees may be incurred; after 90 days retake may be required)

OFFICIAL EXIT EXAM DATE	GRADE

Name: _____
(Print clearly and as you wish to have YOUR NAME printed on Certificate)

Professional Certification # _____

District: _____ Position: _____ Years: _____

District Address: _____ Cell Phone # _____

District Email address to receive Certificate: _____

Personal Email address (optional) _____

List all TAPT Conference and Trade Shows (not class only or pre-conference events) attended in last three years:

Supervisor Name: _____ Email: _____

Applicant Signature: _____ **Date:** _____

APPLICATIONS ARE GENERALLY PROCESSED IN BATCHES FROM AUGUST 1 THROUGH MARCH 1 DUE TO CONFERENCE PREPARATIONS AND REGISTRATIONS.

Revised 01-01-2023