



# WASBO

## WYOMING ASSOCIATION OF SCHOOL BUSINESS OFFICIALS

Wyoming Registered School Business

Official Check List

(to be attached on front of application)

Initial \_\_\_\_\_

Renewal \_\_\_\_\_

NAME \_\_\_\_\_

TITLE \_\_\_\_\_

SCHOOL DIST/ EDUCATIONAL UNIT \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY/STATE/ZIP \_\_\_\_\_

### CHECK LIST

Applicant is Claiming      PRC Secretary Verified

- |  |         |        |         |        |
|--|---------|--------|---------|--------|
| a. Active or life membership in WASBO for the immediate three (3) years prior to application.  | ___ Yes | ___ No | ___ Yes | ___ No |
| b. System-wide administrative and/or supervisory position with responsibility for at least three (3) areas of specialization.            | ___ Yes | ___ No | ___ Yes | ___ No |
| c. Education   | ___ Yes | ___ No | ___ Yes | ___ No |
| 1) Earned Bachelor's Degree  |         |        |         |        |
| 2) Earned Associate's Degree and eight (8) years experience in at least three (3) areas of specialization.                               | ___ Yes | ___ No | ___ Yes | ___ No |
| 3) Sixty (60) semester hours of college credit and eight (8) years of experience in at least three (3) areas of specialization.          | ___ Yes | ___ No | ___ Yes | ___ No |
| Official transcripts included?   | ___ Yes | ___ No | ___ Yes | ___ No |
| d. Three (3) years experience in one entity in at least three (3) areas of specialization.   | ___ Yes | ___ No | ___ Yes | ___ No |
| e. Minimum of twenty-four (24) continuing education units in area of specialization within the three (3) years prior to the application. | ___ Yes | ___ No | ___ Yes | ___ No |
| f. Governing board's approved (enclosed)   |         |        |         |        |
| 1) Job description   | ___ Yes | ___ No | ___ Yes | ___ No |
| 2) Administrative  | ___ Yes | ___ No | ___ Yes | ___ No |
| g. Chief school administrator certification  | ___ Yes | ___ No | ___ Yes | ___ No |
| h. Grandfathering (good until Aug. 31, 1988)   |         |        |         |        |
| 1) Complied with items b, c, f, and g above  | ___ Yes | ___ No | ___ Yes | ___ No |
| 2) Three (3) years experience in last five (5) years in one (1) school entity in at least three (3) areas of specialization.             | ___ Yes | ___ No | ___ Yes | ___ No |
| 3) Current WASBO active member for the immediate two (2) years prior to application.   | ___ Yes | ___ No | ___ Yes | ___ No |
| Fees are enclosed in the amount of \$ _____  | ___ Yes | ___ No | ___ Yes | ___ No |

APPLICANT'S SIGNATURE \_\_\_\_\_

Application was submitted within the deadline date(s) \_\_\_ Yes \_\_\_ No \_\_\_ Yes \_\_\_ No

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PRC SECRETARY SIGNATURE

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NOTE: If in the review by the Professional Registration Committee Secretary, documentation requested and being claimed is not enclosed, the PRC Secretary will inform the applicant at the earliest possible time of his/her failure to include such documentation. However it is the responsibility of the applicant to provide this documentation within the timeline schedule. Any documentation received after the timeline schedule will cause the application to be delayed until the next review period as per the published schedule.

# WASBO

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Renewal \_\_\_\_\_

NAME \_\_\_\_\_

TITLE \_\_\_\_\_

SCHOOL DIST/ EDUCATIONAL UNIT \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY/STATE/ZIP \_\_\_\_\_

a. I am and have been an Active or Life member of WASBO for the immediate three (3) years prior to application. I have held a WASBO membership for the years of \_\_, \_\_\_\_\_, and \_\_\_\_\_.

b. My system-wide administrative and supervisory position consists of those specialized areas as listed below. Please check those areas of responsibility.

- |   |   |
|---|---|
| <input type="checkbox"/> Auditing   | <input type="checkbox"/> Student Accounting                   |
| <input type="checkbox"/> Case Management and Investments                  | <input type="checkbox"/> Data Processing                      |
| <input type="checkbox"/> Debt Service & Capital Fund Management           | <input type="checkbox"/> Financial Accounting                 |
| <input type="checkbox"/> Food Service Operation                           | <input type="checkbox"/> Maintenance of Plant                 |
| <input type="checkbox"/> Negotiations                                     | <input type="checkbox"/> Office Management                    |
| <input type="checkbox"/> Operation of Plant                               | <input type="checkbox"/> Payroll Accounting                   |
| <input type="checkbox"/> Personnel Management                             | <input type="checkbox"/> Pupil Transportation Management      |
| <input type="checkbox"/> Purchasing & Supply Management                   | <input type="checkbox"/> Real Estate & Fixed Asset Management |
| <input type="checkbox"/> School Board Secretary                           | <input type="checkbox"/> School & Community Relations         |
| <input type="checkbox"/> School Plant Planning & Construction Supervision | <input type="checkbox"/> School Store Management              |
| <input type="checkbox"/> Tax Administration                               | <input type="checkbox"/> Other, list in detail                |

c. 1. I have obtained a Bachelor's Degree in \_\_\_\_\_ (year), from \_\_\_\_\_ (name of college); or

2. have earned an Associate Degree in \_\_\_\_\_ (year), from \_\_\_\_\_ (name of college) and have completed the equivalent of four (4) years experience for every incomplete year of college with the following educational entity(ies) \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, and \_\_\_\_\_ above an Associate Degree in at least three (3) areas of specialization, listed below; or

3. sixty (60) semester hours of college credits in \_\_ (year), from \_\_\_\_\_ (name of college) and have completed the equivalent of four (4) years experience for every incomplete year of college above and Associate Degree in at least three (3) areas of specialization, listed below:

\_\_\_\_\_

\_\_\_\_\_

A certified transcript copy must be attached with the application showing all education hours from all universities or colleges attended.

d. I have been a business official in \_\_\_\_\_ School District from \_\_ (year) to \_\_\_\_\_ (year) and was responsible for the following three (3) areas.

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- e. I have completed a minimum of twenty-four (24) continuing education units in the areas of specialization within the immediate three (3) years prior to application. I have provided documentation showing the number of continuing education units I have obtained.
- f. I have submitted my employing governing board's approved job description for my position, and the approved administrative organization chart with my official application. Documentation must be attached.
- g. My Chief School Administrator has certified on this application that I am a business officer in the entity, that the areas of responsibility are accurately checked, that other information on the application is accurate, and that I possess a high degree of character and integrity, and have demonstrated competence and proficiency in my school business assignments and responsibilities.

I hereby verify that this is true.

\_\_\_\_\_  
SIGNATURE OF CHIEF SCHOOL ADM.

\_\_\_\_\_  
TITLE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SCHOOL DIST/RICHT

\_\_\_\_\_  
ADDRESS

\_\_\_\_\_  
CITY/STATE/ZIP

- h. Grandfathering – all persons presently holding qualifying positions in Wyoming on July 1, 1986 are currently eligible and will have until August 31, 1988 to qualify under the following provisions. I wish to apply under the grandfathering clause with the understanding that I have met the three (3) provisions as listed below. Documentation needs to be attached if required.
  - 1. Applicant must comply with items b, c, f, and g above
  - 2. Applicant shall have three (3) years experience in the last five (5) years in one school entity in at least three (3) areas of specialization.
  - 3. Applicant must be and have been a current WASBO ACTIVE member for the immediate two (2) years prior to application.

This is to certify that I, the undersigned, have complied with all the requirements for the status of a Wyoming Registered School Business Official and have, through proper affidavit and documentation, submitted this evidence above.

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
TITLE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SCHOOL DIST/RICHT

\_\_\_\_\_  
ADDRESS

\_\_\_\_\_  
CITY/STATE/ZIP