



# WASBO

## WYOMING ASSOCIATION OF SCHOOL BUSINESS OFFICIALS

Wyoming Registered School Business Member  
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. Current active member in WASBO                          | ___Yes | ___No | ___Yes | ___No |
| b. System-wide administrative and/or supervisory position. | ___Yes | ___No | ___Yes | ___No |
| c. Governing board's approved (enclosed)                   |        |       |        |       |
| 1) Job description   | ___Yes | ___No | ___Yes | ___No |
| 2) Administrative organizational chart                     |        |       |        |       |
| 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

\_\_\_\_\_  
PRC SECRETARY SIGNATURE

\* \* \* \* \*

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

## WYOMING ASSOCIATION OF SCHOOL BUSINESS OFFICIALS

Application for:  
Wyoming Registered School Business  
Member

Initial \_\_\_\_\_

Renewal \_\_\_\_\_

\_\_\_\_\_  
NAME

\_\_\_\_\_  
TITLE

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

\_\_\_\_\_  
ADDRESS

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

- a. I am a current Active member of WASBO.
- 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. 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.

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