

**STATE OF ARKANSAS
BOARD OF CERTIFIED COURT REPORTER EXAMINERS
(BOCCRE)
625 MARSHALL STREET
LITTLE ROCK, ARKANSAS 72201
501-425-5995
arboccre@arcourts.gov
(Effective January 1, 2024)**

**APPLICATION FOR EXAMINATION FOR
CERTIFIED COURT REPORTER**

PLEASE SELECT THE DATE YOU PLAN TO TEST

- ☐ February 3-4, 2024
**NOTE: APPLICATION, FEE, AND BACKGROUND CHECK MUST BE RECEIVED BY
January 4, 2024**
- ☐ June 8-9, 2024
**NOTE: APPLICATION, FEE, AND BACKGROUND CHECK MUST BE RECEIVED BY
May 9, 2024**
- ☐ October 5-6, 2024
**NOTE: APPLICATION, FEE, AND BACKGROUND CHECK MUST BE RECEIVED BY
September 5, 2024**

CHECKLIST AND INSTRUCTIONS FOR CERTIFIED COURT REPORTER EXAM APPLICATION

The Board of Certified Court Reporter Examiners requires a certified state criminal background check from all applicants seeking certification. That background check must be dated within 12 months of the exam date.

STATE OF ARKANSAS APPLICANT:

In-state applicants shall obtain a certified background check from the Arkansas State Police and include it with the application for certification.

Applications will not be approved until a certified state background check is completed and received by the Board.

NONRESIDENT APPLICANT:

Out-of-state applicants must submit a certified background check from the state of residence from a governmental agency approved by the Board.

Applications will not be approved until a certified state background check is completed and received by the Board

APPLICATION CHECKLIST:

- ☐ Application (signed and notarized)
- ☐ Completed background check in compliance with above information
- ☐ Use of Electronic Equipment Statement and Agreement (signed)
- ☐ Photocopy of your drivers license or state ID card
- ☐ Check or money order payable to BOCCRE, for application fee in the amount of \$75 for in-state applicants or \$150 for out-of-state applicants to:

Michelle Weise
Supreme Court Licensing Director
625 Marshall Street
Little Rock, Arkansas 72201

APPLICATION FOR EXAMINATION FOR CERTIFIED COURT REPORTER

PLEASE PRINT OR TYPE

Name: _____

P.O. Box or Street Address: _____

City: _____ State: _____ ZIP: _____

Daytime phone number: _____

Email address: _____

Method of verbatim reporting:

- ☐ Voice
- ☐ Steno Machine

Are you certified in or have you reported in any other state?

- ☐ Yes
- ☐ No

If yes, provide the following:

- State: _____
- Type of Certification: _____
- Certificate Number: _____
- Date Certified: _____
- Currently in good standing:
 - ☐ Yes -- Effective date: _____
 - ☐ No

EMPLOYMENT HISTORY

For the previous 10 years list present and past employment, beginning with the most recent:

EDUCATION AND TRAINING

List highest education achieved and professional training, beginning with the most recent:

BACKGROUND INFORMATION

- Have you ever had a professional license or certificate of any kind suspended, revoked, surrendered, refused, or denied in any jurisdiction?
☐ Yes _____
(Please explain)
☐ No
- Is there any investigation pending against a professional license or certificate issued to you in any jurisdiction?
☐ Yes _____
(Please explain)
☐ No

ELIGIBILITY REQUIREMENTS

I am:

- At least 18 years of age
☐ Yes
☐ No
- Of good moral character
☐ Yes
☐ No

If you have not responded "yes" to each of the foregoing statements, please explain:

- ☐ I have: (please explain in detail below) **OR**
- ☐ I have not:

- Been adjudicated or found guilty, or entered a plea of guilty to or nolo contendere to, any felony, or to any misdemeanor that reflects adversely on the applicant's honesty, trustworthiness, or fitness as a reporter in other respects, or to any crime, a necessary element of which, as determined by the statutory or common law definition of the crime, involves interference with the administration of justice, false swearing, misrepresentation, fraud, deceit, bribery, extortion, misappropriation, theft, or an attempt, conspiracy or solicitation of another to commit a felony.

Explanation of foregoing response:

PERSONAL REFERENCES

(Name)

(Phone or Email)

(Name)

(Phone or Email)

(Name)

(Phone or Email)

I understand that prior to receiving my certification, I must attend an orientation administered by the Board of Certified Court Reporter Examiners, which will be held in Little Rock, Arkansas, or via Zoom presentation, at the discretion of the Board.

Does applicant require assistance with the testing process due to special needs or ADA requirements?

- ☐ Yes (documentation will be required)
☐ No

I swear/attest that the information contained in this application is true and factual to the best of my knowledge.

Applicant signature

Date

STATE OF _____

COUNTY OF _____

SUBSCRIBED AND SWORN to before me, this ____ day of _____, 20__.

Notary Public

My Commission Expires:

USE OF ELECTRONIC EQUIPMENT STATEMENT AND AGREEMENT

I UNDERSTAND AND AGREE:

If I use any type of electronic equipment during the examination, including, but not limited to, a laptop computer, digital recorder, steno machine with computer aided transcription software, I must complete, sign, and file this Electronic Equipment Statement and Agreement with the attached application for examination.

I understand that Wi-Fi shall not be used at the test site.

I understand that I will not save the exam on my computer or other equipment and I will not leave the exam site with a copy of the exam in any form, electronic or otherwise, including but not limited to Dropbox, OneDrive, or other cloud storage,.

It is my responsibility to understand exactly how my equipment works. The Board/test proctors are not responsible for erasing the exam from my equipment. I acknowledge that a representative of the Board will watch me erase the exam from my equipment.

Other than the flash drive(s) which the Board will provide for use during the examination, I am responsible for furnishing all equipment and supplies necessary for taking this examination, including all electronic equipment, necessary cables, extension cords, and foot pedals.

I will have 3-3/4 hours to complete the transcription of three segments, with 1-1/4 hour (75) minutes allowed for each section of the dictation exam.

If any of my equipment malfunctions, I am not allowed to use or borrow equipment from other test applicants. Any equipment malfunction is my responsibility and the test proctors will not assist me in correcting or repairing the malfunction. Said malfunction may result in me being disqualified. I will be allowed 30 minutes from the start of the test to correct any malfunction. If I cannot correct or resolve the problem within this time, I will leave the test room at the conclusion of the 30-minute period.

TYPE OF ELECTRONIC EQUIPMENT I WILL BE USING:

Laptop computer: _____

Digital recorder: _____

Name of software: _____

Regular recorder: _____

Stenomask or steno machine: _____

Name of CAT software: _____

Print name

Signature

Date