

NORTH CAROLINA PSYCHOLOGY BOARD
895 State Farm Road, Suite 101
Boone, North Carolina 28607
(828) 262-2258
Email: info@ncpsychologyboard.org

**APPLICATION FOR CERTIFICATE OF REGISTRATION
OF PROFESSIONAL CORPORATION ***
(refer to North Carolina General Statute 55-B)

NORTH CAROLINA

APPLICATION FEE: \$50.00

_____ COUNTY

1. Name of Corporation: (Must contain extension referencing corporation-refer to instructions)

2. Purpose for which corporation is organized:

3. Mailing Address (The certification will be mailed to this address unless instructed otherwise):

Telephone: (____) _____ E-mail Address: _____

4. Street Address: _____

5. Name, address, and license number (if applicable) of incorporator(s): (One MUST be licensed)

1) _____

License No. _____

2) _____

License No. _____

3) _____

License No. _____

4) _____

License No. _____

6. Name and license number of stockholder(s): (ALL must be licensed professionals-refer to instructions)

| Name | License No. |
|-------|-------------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

7. Name and occupation of members of Board of Directors: (One MUST be licensed)

| Name | Occupation |
|-------|------------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

8. Name and occupation of officers: (One MUST be licensed)

| Name | Occupation |
|-------|------------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

9. Name and license number of PSYCHOLOGISTS to be **employed** by the corporation:

| Name | License No. |
|-------|-------------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

10. Name and duties of persons **OTHER THAN PSYCHOLOGISTS** employed, or to be employed, by the corporation:

| Name | Duties |
|-------|--------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

The rest of this Page is intentionally left blank.

We attest, to be best of our knowledge and belief, that no disciplinary action is pending in any jurisdiction against any of the licensed incorporators, officers, directors, shareholders, or employees. The undersigned incorporators acknowledge that the professional corporation is being organized under the provisions of Chapter 55B of the General Statutes of North Carolina, and that all business will be conducted in compliance with all applicable North Carolina general statutes and administrative rules of the North Carolina Psychology Board.

Submitted by (incorporators): (all signatures from Item 5)

Name _____ Signature _____

Name _____ Signature _____

Name _____ Signature _____

Name _____ Signature _____

Signed before me this _____ day of _____, 20 _____.

Notary Public
My commission expires _____

SEAL

Pursuant to G.S. § 55B-10, “No professional corporation shall open, operate, or maintain an establishment for any of the purposes set forth in this Chapter without first having obtained a certificate of registration from the licensing board or boards.” If jointly forming with other professionals, as allowed by G.S. § 55B-14(c), each licensing board must provide a Certification of Application before the applicants can submit Articles of Incorporation to the Secretary of State’s office.

*** SUBMIT THIS APPLICATION FORM, A \$50 APPLICATION FEE, AND A COPY OF THE PROPOSED ARTICLES OF INCORPORATION TO THE BOARD OFFICE IN ORDER TO RECEIVE THE REQUIRED CERTIFICATION OF APPLICATION FORM THAT YOU ARE TO SUBMIT TO THE SECRETARY OF STATE’S CORPORATION DIVISION ALONG WITH THE ARTICLES OF INCORPORATION.**

FINALLY, ONCE YOU HAVE RECEIVED THE APPROVED ARTICLES OF INCORPORATION BACK FROM THE SECRETARY OF STATE’S OFFICE, REMEMBER TO SEND A FULL, APPROVED COPY (NOT JUST THE COVER PAGE) TO THE BOARD OFFICE SO THAT THE FINAL CERTIFICATE OF REGISTRATION CAN BE ISSUED.