



REQUEST FOR VOLUNTARY WITHDRAWAL FROM THE CKP PROGRAM

NAME: _____

ADDRESS: _____

TELEPHONE: _____

EMAIL: _____ ALTERNATE EMAIL: _____

I hereby request to voluntarily withdraw from the Kentucky Paralegal Association's Certified Kentucky Paralegal Program as set out in Section 12 of the Kentucky Paralegal Association's Professional Standards and Certification Program Policy.

I acknowledge and understand that voluntary withdrawal under this Section may be granted on the basis of demonstrated hardship or for good cause shown as determined by the KPA's Certification Committee. I have attached a written statement in support of my request.

I further acknowledge and understand that voluntary withdrawal under Section 12 shall not be granted by the Committee if any one of the following conditions exist at the time of the request for voluntary withdrawal: (A) A deficiency exists under Section 5.05 for failure to maintain continuous KPA membership and/or for failure to comply with the annual CLE credit requirements of Section 9.01; (B) Certification has been suspended or revoked under Section 10; and/or (C) A complaint, disciplinary action, or proceedings for Standard of Conduct violations are pending against the CKP under Section 15.

I further acknowledge and understand that a CKP who has voluntarily withdrawn from the Kentucky Paralegal Association's Certified Kentucky Paralegal Program shall cease to use the CKP designation. Upon voluntary withdrawal, the name of the withdrawn CKP shall be removed from the official Kentucky Paralegal Association CKP Roster.

A former CKP who has been granted voluntary withdrawal from the KPA's Certified Kentucky Paralegal Program may be restored to a CKP in good standing upon compliance with the conditions set forth in Section 13 of the Kentucky Paralegal Association's Professional Standards and Certification Program Policy.

Certified Kentucky Paralegal (Signature)

Date _____

*Mail completed form and written statement supporting request to:
KPA, P. O. Box 2675, Louisville, KY 40201-2675 OR Email to: kpa.kpacc@gmail.com.*