

Idaho Industrial Commission Workers' Compensation Certification Program

Recertification as a Certified Idaho Workers' Compensation Specialist

Name: _____

Title: _____

Email: _____

Organization: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Telephone: _____

Recertification fee: \$25.00

Please make checks payable to:

*Idaho Industrial Commission
CIWCS Program
P.O. Box 83720
Boise, ID 83720-0041
Fax: 208-334-2321*



Payment Enclosed

Pay on-line
<https://iic.idaho.gov/home/make-a-payment/>

I certify that I have read the materials under the “Claims and Benefits Guidance” section at <https://iic.idaho.gov/benefits-administration/insurance-information/>.

Signature

Date

If you would like to recertify by attending an upcoming course, please complete a registration form and indicate that you will be attending the upcoming course to recertify. The fee to attend an upcoming class to recertify will be \$100.00, and you will not be required to retest to become recertified. Registration forms are available at <https://iic.idaho.gov/ciwcs/>.

I will be attending an upcoming course to obtain my recertification. I have attached a registration form indicating the upcoming course I would like to attend.

(Recertification is only available to past CIWCS course attendees who have achieved Certification) If you have any questions, please call Angie Howe @ 208-334-6004.