

# Wisconsin Department of Safety and Professional Services

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## DIVISION OF PROFESSIONAL CREDENTIAL PROCESSING

### WALL CERTIFICATE WITH WALLET CARD OR GOVERNOR-SIGNED WALL CERTIFICATE REQUEST FORM

(Please allow 7 to 10 business days for processing.)

#### CUSTOMER INFORMATION:

Name of Credential/License Holder:

Credential/License Number(s):

Profession(s):

#### REQUIRED PAYMENT INFORMATION:

Mark the appropriate box(es) to indicate type of certificate:

Wall Certificate with Wallet Card (\$10.00 per certificate)

Governor Signed Wall Certificate (\$10.00 per certificate)

Indicate Specialty to be Printed (if any)

#### Wall Certificate with Wallet



#### Governor Signed Certificate



**Note: Not all specialties are available for printing. These certificates may be printed in the same format from your personal computer.**

#### Required Information for Processing: You must provide a mailing address and a daytime phone number.

Name of Card Holder:

Same as Customer listed above.

Address to send certificate(s):

(street, city, state, and zip)

Daytime Phone Number:  -  -

Email Address:

**TOTAL AMOUNT TO CHARGE:** \$

**DSPS is only authorized to charge the amount listed.  
Incorrect amounts will cause delays in processing.**

Cardholder's Address:

(street)  (city)  (state)  (zip code)

Credit Card Number:  -  -  -

Expiration Date:  /



3-digit security code



4-digit security code

Security Code: (please list)

I understand by signing below, I authorize the State of Wisconsin Department of Safety and Professional Services to charge my credit card for the above amount and a 2% convenience fee assessed at the time of processing.

Cardholder's Signature:

**For Receiving Purposes**

DSPS uses RightFax to ensure safe and secure transmission of your payment information.