

CERTIFIED BUSINESS INTERMEDIARY® APPLICATION

Instructions:

• Do not submit until all requirements have been met.

PERSONAL INFORMATION:

FIRST:	MI:	LAST:	
(Name should be written as you wish it	to appear on the CBI plaque receive	d upon completing the CBI credential.)	
COMPANY:			
ADDRESS:			
CITY:	STATE/PROVINCE:	ZIP/MAIL CODE:	COUNTRY:
PHONE:	FAX:		
EMAIL:			
Have you ever been convict a business OR REAL ESTATE			le, valuation, or funding of
If yes, please explain:			
Verification:			
Please verify by checking th	e boxes below that each is	s true.	
I have attended an IBBA C	onference		
I have completed all requi	red courses (100, 101, 104	l, 210, 220 and 221).	
🗆 l have completed 16 credi	t hours of IBBA or MAS ele	ectives.	
I have submitted the appropriate form to show evidence as lead seller broker on three (3) going concern business transactions (applicable for applications submitted after June 1, 2018).			
 My submitted business transformed area. 	ansactions are true and ac	curate and follow all applic	able laws in my
I took and passed the CBI	Exam.		

Acknowledgement:

I have read and understood the Code of Ethics and agree to abide by the Standards of Ethical Conduct found at <u>www.ibba.org</u>.

I declare and affirm the statements made in the foregoing application, including accompanying statements and transcripts, are true, complete, and correct. I authorize the investigation of all statements contained in this application.

I understand that I may not use the initials "CBI" or the words "Certified Business Intermediary" until I have received official notice from IBBA Headquarters.

PRINT NAME:

SIGNATURE OF APPLICANT: DATE:

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