ABSTRACTERS' BOARD OF EXAMINERS



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NOTICE

The Boards' next examination will be held Monday, April 26th, 2021 beginning at 10:00 A.M. at the Salina Area Technical College at 2562 Centennial Rd., Salina, Ks 67401 Building A; rooms A112 and A126.

If you desire to take the examination, please complete the enclosed application and return to this office together with the statutory fee of \$50.00 for retakes or \$75.00 for first exam on or before April 20th, 2021.

As a part of the examination you will need to prepare and bring with you an abstract of title as set out in the application. If you have prepared an abstract previously, another will not be required.

We would suggest that you bring with you to the examination, a straight edge, preferably with an engineers scale and protractor to be used in the drawing of legal descriptions. A small calculator is permissible if you wish to use one.

The only study course available is "Evidencing Kansas Land Titles" which may be obtained by contacting the website at www.klta.org.



APPLICATION FOR EXAMINATION

	New	application ()		Retake	()		
		(a fee of \$50.00) for retake or \$75.00 fo	r first time must ac	ecompany this f	orm)		
ТОТ	ΓHE ABSTRAC	CTOR'S BOAR	RD OF EXAMINERS:					
tered	l and Licensed	Abstractor, en	e State of Kansas, I here titling me to engage in ort of this application i	the business of ma	aking, compilin	ng and s	selling Abstracts	
1.	NAME			AGE				
	ADDRESS							
2.	State your ed	ducation, expe	erience and period of ti				_	
 4. 	abstract nee average title remain the p	Please prepare and bring with you to the examination, an Abstract of Title on a tract of land. This abstract need not be long but should contain entries of various instruments found of record in the average title and should contain court cases from all of the courts of record. This abstract will be and remain the property of the Board of Examiners and will not be returned. List three Character references, who know you personally.						
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	, Address				_			
	, Address, Address				_			
			, Address		_			
		Dated at		_, this	_day of	;	, A.D. 20	
						Applicant's signature		
		Subscribed	and sworn to before m	ne this day of	f	_, A.D.	20	
						Notar	y Public	
	My (Commision Ex	xpires:					